

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:

41

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY			
	Mr	Tennell					
	NICKNAME	LAST	SUFFIX	Date Received			
		Atkins					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #;		CITY;	STATE;	ZIP CODE		
	2717 Meadow Stone Lane		Dallas TX	75232			
<input type="checkbox"/> Change of Address							
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(469)	417 8939					
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Date Hand-delivered or Date Postmarked			
		Velma		Receipt #			
	NICKNAME	LAST	SUFFIX	Amount \$			
		Milliner		Date Processed			
				Date Imaged			
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;		CITY;	STATE;	ZIP CODE		
(Residence or Business)	1407 Laura Lane		Dallas TX	75241			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(214)	371 7482					
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)						
10 PERIOD COVERED	Month	Day	Year	Month	Day	Year	
	07	01	2020	THROUGH	12	31	2020
11 ELECTION	ELECTION DATE		ELECTION TYPE				
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	
				<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)			
				Council District 8			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

14 C/OH NAME

Mr Tennell Atkins

15 Filer ID (Ethics Commission Filers)

**16 NOTICE FROM
POLITICAL
COMMITTEE(S)**

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. *THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT.* CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

**17 CONTRIBUTION
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00

2. **TOTAL POLITICAL CONTRIBUTIONS**
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 45250.00

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. **TOTAL POLITICAL EXPENDITURES** \$ 9452.52

**CONTRIBUTION
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 0.00

**OUTSTANDING
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 15000.00

18 AFFIDAVIT

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

ELECTRONICALLY CERTIFIED

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mr Tennell Atkins, this the 15th day of January, 2021, 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

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME
Mr 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	\$ 45,250.00
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	\$ 9,452.52
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 15

2 FILER NAME

Mr Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date

11/01/2020

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tre Black

6 Contributor address;

City; State; Zip Code

2426 W Tenth St

Dallas, TX 75211

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/01/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dave Wishnew

Contributor address;

City; State; Zip Code

1700 Pacific

Dallas, TX 75204

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/01/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lille T Molett

Contributor address;

City; State; Zip Code

2723 Meadow Stone Lane

Dallas, TX 75232

Amount of contribution (\$)

150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/01/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joan Walne

Contributor address;

City; State; Zip Code

10200 Cariboo Trail

Dallas, TX 75238

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 15

2 FILER NAME

Mr Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date

07/02/2020

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

HENRY BILLINGSLEY

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

1722 ROUTH ST Suite 770

DALLAS, TX 75201

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/04/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jack Cuz

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

P.O. Box 173218

Arlinton, TX 76003

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/04/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Southwestern Land and Title, LLC

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

627 Mercury Ave

Duncanville, TX 75137

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/06/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Steven Kim

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

3905 Tidal Drive

Carrollton, TX 76007

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 15

2 FILER NAME

Mr Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date

07/17/2020

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mason Brown III

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

P.O. Box 29615

Dallas, TX 75229

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/12/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joan Walne

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

10200 Cariboo Trail

Dallas, TX 75238

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/15/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Douglas Hunt

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

610 Creek View Circle

Ovilla, TX 75134

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/18/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dalton Lott

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

P.O. Box 765209

Dallas, TX 75378

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 15

2 FILER NAME

Mr Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date

12/10/2020

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Helen Giddings

6 Contributor address;

City; State; Zip Code

400 S Zang Blvd

Dallas, TX 75208

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/12/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Thomas Dunning

Contributor address;

City; State; Zip Code

2100 Ross Ave Suite 1200

Dallas, TX 75201

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/07/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

R Steve Folsom

Contributor address;

City; State; Zip Code

15475 Dallas Parkway Suite 800

Addison, TX 75001

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/16/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Harlan Crow

Contributor address;

City; State; Zip Code

3819 Maple Ave

Dallas, TX 75219

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:
5 of 15

2 FILER NAME

Mr Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date

10/12/2020

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Coats Rose

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

3 Greenway Plaza Suite 1000

Houston, TX 77048

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/08/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Vaughn Thompson

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

P.O. Box 561527

Dallas, TX 75356

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/18/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Rader

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

P.O. Box 249

Colleyville, TX 76034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/05/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bradley Spllicy

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

717 Wake Forrest Dr

Dallas, TX 75214

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 15

2 FILER NAME

Mr Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date

07/28/2020

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Trelaine Mapp

6 Contributor address;

City; State; Zip Code

12612 Beech Tree Ln

Dallas, TX 76040

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/19/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ryan Griffin

Contributor address;

City; State; Zip Code

P.O. Box 190829

Dallas, TX 75219

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/19/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jennifer Clarke

Contributor address;

City; State; Zip Code

3491 Foxboro Drive

Richardson, TX 75082

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/14/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

M Rideau

Contributor address;

City; State; Zip Code

0 SMU Box 75-3183

Dallas, TX 75275

Amount of contribution (\$)

100.00

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 15

2 FILER NAME

Mr Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date

08/14/2020

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Eddie Reeves

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

1142 N Clinton Ave

Dallas, TX 75208

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/14/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tante Williams

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1005 Lakeridge Ct

Colleyville, TX 76034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/01/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Deedie Rose

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

5 Willowood

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/01/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dr Maria Garcia

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

618 W Jefferson

Dallas, TX 75208

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 15

2 FILER NAME

Mr Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
07/01/2020

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

Albert Wash

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code

731 S R L Thornton Frwy Dallas, TX 75203

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
07/01/2020

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

V Neils Agather

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code

5661 Mariner Dr Dallas, TX 75237

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
12/28/2020

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

Delva King

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code

1243 W Pleasant Run Rd Desot, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
12/28/2020

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

johnnie king jr

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code

1243 w pleasant run rd 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:
9 of 15**2** FILER NAME

Mr Tennell Atkins

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

12/14/2020

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

Roland 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

07/01/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bobby Lyle

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

24 Masland Circle

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/01/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Edwin Cabaniss

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

1344 N Windomere Ave

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/01/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sophia Johnson

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

1001 Belleview St

Dallas, TX 75215

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 15

2 FILER NAME

Mr Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date

07/16/2020

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joh Proctor

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

1524 Oak Meadows Dr

Dallas, TX 75232

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/15/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

PETE SCHENKEL

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

614 N BISHOP Suite 3

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/17/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Golden Auto Parts Recyclers

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

3301 S Lamar St

Dallas, TX 75215

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/19/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lynn McBee

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

3925 Stonebridge Drive

Dallas, TX 75204

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 15**2** FILER NAME

Mr Tennell Atkins

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

12/22/2020

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

Jon Napper

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

300 N Akard Suite 3106

Dallas, TX 75201

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

Date

12/17/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gail Terrell

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

P.O. Box 41561

Dallas, TX 75241

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/22/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sam Coats

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

26 Ryddington Place

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/12/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jewel Parrish

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

1256 Regents Park Ct

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:
12 of 15

2 FILER NAME

Mr Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
07/20/2020

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Christine Paris

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

P.O. Box 7665129

Dallas, TX 75376

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/07/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gilbert Aranza

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

P.O. Box 601527

Dallas, TX 75360

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/19/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tina Rich

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

P.O. Box 2083

Frisco, TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/18/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Penz

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

6307 Pintail Ln

Frisco, TX 75034-2290

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 15

2 FILER NAME

Mr Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
08/19/2020

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Nicole S Blake

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

11004 Ormond Lane

Frisco, TX 75035

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
08/19/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mendy McCain

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

5284 Quail Run

Frisco, TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
08/19/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Danielle Bernard

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

5020 Kimber Ln

Durant, OK 74701

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
08/20/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amber Libby

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

2092 Hague Drive

Frisco, OK 75033

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 15**2** FILER NAME

Mr Tennell Atkins

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

08/20/2020

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

John Brantley

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

P.O. Box 190829

Dallas, TX 75219

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

Date

08/20/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Clayton Thomas

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

6827 County Road 90

Celina, TX 75009

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/18/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Pat Schenkel

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

4201 Belclair Ave

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/11/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lucious Williams

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1421 Covington Dr

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:
15 of 15

2 FILER NAME

Mr Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date

12/07/2020

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lucy Billingsley

6 Contributor address;

City; State; Zip Code

1722 Routh St Suite 770

Dallas, TX 75201

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/15/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Hawatha Williams

Contributor address;

City; State; Zip Code

1014 Clifton Lane

Desoto, TX 75115

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/17/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

AECOM PAC

Contributor address;

City; State; Zip Code

2000 K St. Suite 800

Washington, DC 20006

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Contributor address;

City; State; Zip Code

Amount of contribution (\$)

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 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 07/01/2020	5 Payee name ATT	
6 Amount (\$) 485.37	7 Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414	
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 Tennell Atkins Council District 8	
Date 08/01/2020	Payee name ATT	
Amount (\$) 387.36	Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414	
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 Tennell Atkins Council District 8	
Date 09/01/2020	Payee name ATT	
Amount (\$) 250.90	Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414	
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 Tennell Atkins 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: 2 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/01/2020	5 Payee name ATT	
6 Amount (\$) 551.47	7 Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414	
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: Tennell Atkins Office sought: Council District 8 Office held:		
Date 11/01/2020	Payee name ATT	
Amount (\$) 251.00	Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414	
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: Council District 8 Office held:		
Date 12/01/2020	Payee name ATT	
Amount (\$) 501.00	Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414	
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: Council District 8 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 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 07/01/2020	5 Payee name Jefferson Monument	
6 Amount (\$) 350.00	7 Payee address; City; State; Zip Code 1350 Manufacturing St Dallas TX 75207	
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 rent
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Tennell Atkins		
Office sought Council District 8		
Office held		
Date 08/01/2020	Payee name Jefferson Monument	
Amount (\$) 350.00	Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207	
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 rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Tennell Atkins		
Office sought Council District 8		
Office held		
Date 09/01/2020	Payee name Jefferson Monument	
Amount (\$) 350.00	Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207	
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 rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Tennell Atkins		
Office sought Council District 8		
Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/01/2020	5 Payee name Jefferson Monument	
6 Amount (\$) 350.00	7 Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207	
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 rent
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 11/01/2020	Payee name Jefferson Monument	
Amount (\$) 350.00	Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207	
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 rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 12/01/2020	Payee name Jefferson Monument	
Amount (\$) 350.00	Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207	
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 rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 12/01/2020	5 Payee name Jeff Dalton	
6 Amount (\$) 2000.00	7 Payee address; City; State; Zip Code 8552 Royal County Down Dr McKinney, TX 75070	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 consultation
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held </div>	
Date 08/03/2020	Payee name Sams Club	
Amount (\$) 29.29	Payee address; City; State; Zip Code 2900 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 <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held </div>	
Date 08/03/2020	Payee name Sams Club	
Amount (\$) 21.97	Payee address; City; State; Zip Code 2900 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 <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 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: 6 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 08/13/2020	5 Payee name Sams Club	
6 Amount (\$) 27.04	7 Payee address; City; State; Zip Code 2900 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: Council District 8 Office held:		
Date 08/26/2020	Payee name Sams Club	
Amount (\$) 37.52	Payee address; City; State; Zip Code 2900 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: Council District 8 Office held:		
Date 08/31/2020	Payee name Sams Club	
Amount (\$) 29.88	Payee address; City; State; Zip Code 2900 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: Council District 8 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 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 08/31/2020	5 Payee name Sams Club	
6 Amount (\$) 35.05	7 Payee address; City; State; Zip Code 2900 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: Council District 8 Office held:		
Date 09/04/2020	Payee name Sams Club	
Amount (\$) 20.21	Payee address; City; State; Zip Code 2900 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: Council District 8 Office held:		
Date 09/08/2020	Payee name Sams Club	
Amount (\$) 32.66	Payee address; City; State; Zip Code 2900 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: Council District 8 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 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 09/16/2020	5 Payee name Sams Club	
6 Amount (\$) 36.48	7 Payee address; City; State; Zip Code 2900 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
	<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 Tennell Atkins </div> <div> Office sought Council District 8 </div> <div> Office held </div> </div>	
Date 09/23/2020	Payee name Sams Club	
Amount (\$) 29.42	Payee address; City; State; Zip Code 2900 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
	<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 Tennell Atkins </div> <div> Office sought Council District 8 </div> <div> Office held </div> </div>	
Date 09/29/2020	Payee name Sams Club	
Amount (\$) 29.54	Payee address; City; State; Zip Code 2900 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
	<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 Tennell Atkins </div> <div> Office sought Council District 8 </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: 9 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/05/2020	5 Payee name Sams Club	
6 Amount (\$) 30.93	7 Payee address; City; State; Zip Code 2900 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: Council District 8 Office held:		
Date 10/09/2020	Payee name Sams Club	
Amount (\$) 26.58	Payee address; City; State; Zip Code 2900 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: Council District 8 Office held:		
Date 10/13/2020	Payee name Sams Club	
Amount (\$) 27.87	Payee address; City; State; Zip Code 2900 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: Council District 8 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 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/27/2020	5 Payee name Sams Club	
6 Amount (\$) 9.39	7 Payee address; City; State; Zip Code 2900 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
	<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 Tennell Atkins </div> <div> Office sought Council District 8 </div> <div> Office held </div> </div>	
Date 11/02/2020	Payee name Sams Club	
Amount (\$) 32.04	Payee address; City; State; Zip Code 2900 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
	<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 Tennell Atkins </div> <div> Office sought Council District 8 </div> <div> Office held </div> </div>	
Date 11/09/2020	Payee name Sams Club	
Amount (\$) 27.90	Payee address; City; State; Zip Code 2900 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 g
	<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 Tennell Atkins </div> <div> Office sought Council District 8 </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: 11 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 11/10/2020	5 Payee name Sams Club	
6 Amount (\$) 20.58	7 Payee address; City; State; Zip Code 2900 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: Council District 8 Office held:		
Date 11/16/2020	Payee name Sams Club	
Amount (\$) 30.05	Payee address; City; State; Zip Code 2900 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: Council District 8 Office held:		
Date 12/01/2020	Payee name Sams Club	
Amount (\$) 25.09	Payee address; City; State; Zip Code 2900 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: Council District 8 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 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 12/18/2020	5 Payee name Sams Club	
6 Amount (\$) 38.29	7 Payee address; City; State; Zip Code 2900 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
	<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 Tennell Atkins </div> <div> Office sought Council District 8 </div> <div> Office held </div> </div>	
Date 08/03/2020	Payee name Tennell Atkins Home Depot	
Amount (\$) 117.99	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 supplies
	<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 Tennell Atkins </div> <div> Office sought Council District 8 </div> <div> Office held </div> </div>	
Date 10/05/2020	Payee name Tennell Atkins Home Depot	
Amount (\$) 90.00	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 supplies
	<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 Tennell Atkins </div> <div> Office sought Council District 8 </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: 13 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 08/24/2020		5 Payee name Luke Locker			
6 Amount (\$) 76.66		7 Payee address; City; State; Zip Code 3046 Mockingbird Lane Dallas, TX 75205			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 gift	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Office held					
Date 08/31/2020		Payee name Baby Back Shack			
Amount (\$) 31.66		Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215			
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 Council District 8	
Office held					
Date 09/08/2020		Payee name Tennell Atkins Baby Back Shack			
Amount (\$) 29.23		Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215			
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 Council District 8	
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 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 09/17/2020	5 Payee name Baby Back Shack	
6 Amount (\$) 18.51	7 Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215	
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: Council District 8 Office held:	
Date 10/02/2020	Payee name Baby Back Shack	
Amount (\$) 45.78	Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215	
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 Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:	
Date 09/01/2020	Payee name KFC	
Amount (\$) 28.60	Payee address; City; State; Zip Code 3415 W Camp Wisdom 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 Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 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: 15 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2020	5 Payee name KFC	
6 Amount (\$) 11.76	7 Payee address; City; State; Zip Code 3415 W Camp Wisdom 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: Council District 8 Office held:	
Date 09/30/2020	Payee name KFC	
Amount (\$) 9.72	Payee address; City; State; Zip Code 3415 W Camp Wisdom 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 Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:	
Date 11/04/2020	Payee name Chilis	
Amount (\$) 32.74	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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

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 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 09/08/2020	5 Payee name Whataburger	
6 Amount (\$) 12.20	7 Payee address; City; State; Zip Code 3222 W Camp Wisdom 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
	<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 Tennell Atkins </div> <div> Office sought Council District 8 </div> <div> Office held </div> </div>	
Date 09/14/2020	Payee name Red Lobster	
Amount (\$) 91.03	Payee address; City; State; Zip Code 603 N Cockrell Hill Rd Duncanville, TX 75116	
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
	<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 Tennell Atkins </div> <div> Office sought Council District 8 </div> <div> Office held </div> </div>	
Date 09/14/2020	Payee name Lubys	
Amount (\$) 23.36	Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232	
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
	<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 Tennell Atkins </div> <div> Office sought Council District 8 </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: 17 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 09/21/2020	5 Payee name Lubys	
6 Amount (\$) 46.01	7 Payee address; City; State; Zip Code 5600 S Hampton Rd 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: Council District 8 Office held:	
Date 09/25/2020	Payee name Lubys	
Amount (\$) 25.51	Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232	
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 Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:	
Date 10/05/2020	Payee name Lubys	
Amount (\$) 22.16	Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232	
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 Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 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 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 10/20/2020		5 Payee name Lubys			
6 Amount (\$) 34.28		7 Payee address; City; State; Zip Code 5600 S Hampton Rd 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 Council District 8	
Office held					
Date 10/30/2020		Payee name Lubys			
Amount (\$) 35.37		Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232			
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		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Office held					
Date 10/08/2020		Payee name Chick-Fila			
Amount (\$) 28.43		Payee address; City; State; Zip Code 2429 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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Office held					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/09/2020	5 Payee name Ojeda	
6 Amount (\$) 53.58	7 Payee address; City; State; Zip Code 2109 N Hampton 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: Council District 8 Office held:	
Date 11/02/2020	Payee name Williams Chicken	
Amount (\$) 30.30	Payee address; City; State; Zip Code 6220 Marvin D Love Fw 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 Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:	
Date 11/06/2020	Payee name Olive Garden	
Amount (\$) 39.06	Payee address; City; State; Zip Code 639 S Cockrell Hill Rd Duncanville, TX 75116	
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 Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 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 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 10/13/2020		5 Payee name Target			
6 Amount (\$) 178.05		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) Gift/Awards/Memorials 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 gift	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 10/26/2020		Payee name Party City			
Amount (\$) 35.73		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 supplies	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 10/26/2020		Payee name Office Depot			
Amount (\$) 9.39		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 supplies	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought 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: 21 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 11/25/2020	5 Payee name Office Depot	
6 Amount (\$) 194.83	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 supplies
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:	
Date 11/12/2020	Payee name Popeyes	
Amount (\$) 9.37	Payee address; City; State; Zip Code 2972 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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:	
Date 10/26/2020	Payee name Auto Zone	
Amount (\$) 149.58	Payee address; City; State; Zip Code 1201 W Camp Wisdom Dallas, TX 75232	
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 automobile
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 10/23/2020		5 Payee name Halls Honey Fired Chicken			
6 Amount (\$) 23.35		7 Payee address; City; State; Zip Code 4105 W Camp Wisdom 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 Council District 7	
Date 10/26/2020		Payee name Allstate			
Amount (\$) 283.21		Payee address; City; State; Zip Code 1300 Summit Ave Suite 4111 Worth, TX 76102-4440			
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 auto insurance	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 12/11/2020		Payee name Pappadeaux			
Amount (\$) 92.17		Payee address; City; State; Zip Code 800 E Hwy 67 Duncanville, TX 75137			
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 ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought 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: 23 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
---	--	--

4 Date 12/06/2020	5 Payee name McDonalds
-----------------------------	----------------------------------

6 Amount (\$) 18.02	7 Payee address; City; State; Zip Code 125 W Camp Wisdom 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	Office sought	Office held
	Tennell Atkins	Council District 8	

Date	Payee name
12/18/2020	Black Business Director

Amount (\$)	Payee address;	City; State; Zip Code
400.00	P.O. Box 830631	Richardson, TX 75083

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
		E-Glass display

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