City Secretary's Office

Supplemen Officeholde	tal Report r		FOR Cover She	MSR etSR
1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST MI Chad A	2. Total Pages Filed: 75	
	NICKNAME	LAST SUFFIX West	3. Office Held Dallas City Coun	cil District 1
4. SUPPLEMENTAL REPORT TYPE	c January 15	c 30th day before election c Runoff	c 15th day after camp treasurer appointme (officeholder only)	
	X July 15	c 8th day before election c Exceeded \$500 limit	c Final Report	
5. PERIOD / COVERED		1/1/2024 THROUGH 6/30/2024		
6. ELECTION Month Day Year				
	5/10/2025	c Primary c Runoff $oldsymbol{X}$ (General c Spe	cial c N/A
7. OFFICE- HOLDER	CONTRIBUTION TOTALS	TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LE PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS	•	\$ 0.00
		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOA	ANS)	\$4,500.00
	EXPENDITURE	3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$(\$0.00
	TOTALS	4. TOTAL OFFICEHOLDER EXPENDITURES		\$13,601.39
8. POLITICAL	CONTRIBUTION TOTALS	5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$0.00		\$0.00
(Campaign)		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 19,825.00
	EXPENDITURE	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 0.00
	TOTALS	8. TOTAL POLITICAL EXPENDITURES		\$21,871.58
9. OFFICEHOLDER FUN FOR CAMPAIGN PUR		9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIBUTIONS USED FOR CAMPAIGN EXPENDITURES DURING THE REPORTING PERIOD \$ 0.00		\$ 0.00
10. AFFIDAVIT		I swear, or affirm, under penalty of perju is true and correct and includes all inform me under Title 15, Election code.		
		ELECTRONICALLY CE	ERTIFIED	
AFFIX NOTARY STAI	MP / SEAL ABOVE	Signature of Candidate or	Officeholder	······································
Sworn to and subscribed	before me, by the saidChac	d A West	this the14th	day
		, witness my hand and seal of office.		
Signature of officer ac	dministering oath	Printed name of officer administering oath	Title of officer add	ministering oath

SCHEDULE A1

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

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME Chad A West			3 Filer ID (Ethics Commission Filers)
4 Date 04/08/2024	5 Full name of contributor out-of-state PAC Jennifer Owen	(ID#:)	7 Amount of contribution (\$) 250.00
Campaign Contribution	6 Contributor address; City; 6541 Arborist Lane Dallas,	State; Zip Code TX 75214	
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date 04/08/2024	Joe McElroy	(ID#:)	Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; City; 1207 Eldorado Avenue Dallas,	State; Zip Code TX 75208	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 04/08/2024	Full name of contributor	(ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; City; 4144 N Central Expressway Suite 86 Dallas,	State; Zip Code TX 75204	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 04/08/2024	Full name of contributor ☐ out-of-state PAC Tom Kapioltas	(ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; City; 2295 Sussex Lane Allen,	State: Zip Code TX 75013	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

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

			1 Total pages Schedule A1:
The	Instruction Guide explains how to com	plete this form.	2 of 12
2 FILER NAME Chad A West			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out	of-state PAC (ID#:	_) 7 Amount of contribution (\$)
04/08/2024	Charles Haley		250.00
Campaign Contribution	6 Contributor address; Ci 1411 Cedar Hill Avenue		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Inst	tructions)
Date	Full name of contributor	of-state PAC (ID#:	_) Amount of contribution (\$)
04/08/2024	Aaron Burke		1000.00
Campaign Contribution		ty; State; Zip Code Dallas, TX 75270	
Principal occup	ation / Job title (See Instructions)	Employer (See Inst	ructions)
Date	Full name of contributor out	of-state PAC (ID#:	_) Amount of contribution (\$)
04/09/2024	Ryan Holloway		500.00
Campaign Contribution	Contributor address; Ci 8906 Stanwood Drive	y; State; Zip Code Dallas, TX 75228	
Principal occup	ation / Job title (See Instructions)	Employer (See Inst	rructions)
Date 04/09/2024	Full name of contributor	of-state PAC (ID#:	_) Amount of contribution (\$) 250.00
Campaign Contribution	Contributor address; Cit 2229 Lawndale Drive	State: Zip Code Dallas, TX 75211	
Principal occup	ation / Job title (See Instructions)	Employer (See Inst	tructions)

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SCHEDULE A1

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

The	Instruction Guide explains how to	complete this	form.	1 Total pages Schedule A1: 3 of 12
2 FILER NAME	<u> </u>			3 Filer ID (Ethics Commission Filers)
Chad A West				
4 Date	5 Full name of contributor [out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
04/10/2024	Katherine Homan			500.00
Campaign Contribution	6 Contributor address; 1629 Handley Drive	City; Dallas,	State; Zip Code TX 75208	
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
04/10/2024	Doug Taylor			25.00
Campaign Contribution	Contributor address; 1147 N Winnetka Avenue	City;	State; Zip Code TX 75208	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
04/13/2024	Dave Neumann			200.00
Campaign Contribution	Contributor address; 6318 Turner Way	Citv:	State; Zip Code TX 75230	
Principal occi	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 04/15/2024	Full name of contributor [Elisa Goodwin	out-of-state PAC	(ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; 2310 Broken Point	City; McKin	State: Zip Code ney, TX 75072	
Principal occi	pation / Job title (See Instructions)		Employer (See Instruct	ions)

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SCHEDULE A1

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

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 4 of 12
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Chad A West			
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
04/15/2024	Logan Stansell		50.00
Campaign Contribution	6 Contributor address; City; 2520 Fairmount Street Suite 120 Dallas,	State; Zip Code TX 75201	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
04/15/2024	Lawrence McNally		100.00
Campaign Contribution	Contributor address; City;	State; Zip Code TX 75208	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
04/16/2024	Joseph Pitchford	,	100.00
Campaign Contribution	Contributor address; City; 7422 Midbury Suite 250 Dallas,	State; Zip Code TX 75230	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 04/16/2024	Full name of contributor	(ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; City; 1364 Romano Place Dallas,	State: Zip Code TX 75215	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

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

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 5 of 12
2 FILER NAME Chad A West			3 Filer ID (Ethics Commission Filers)
4 Date 04/19/2024	5 Full name of contributor out-of-state PAC (II Tony Vedda		7 Amount of contribution (\$) 100.00
Campaign Contribution	6 Contributor address; City; 6920 Santa Maria Lane Dallas, T	State; Zip Code 'X 75214	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 04/21/2024	Full name of contributor	D#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; City; 1318 Elmwood Blvd Dallas, T	State; Zip Code	100.00
Principal occup	vation / Job title (See Instructions)	Employer (See Instructio	ns)
Date 04/22/2024	Full name of contributor	D#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; City; 934 Stevens Woods Court Dallas, T	State; Zip Code 'X 75208	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 04/23/2024	Full name of contributor	D#:)	Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; 3899 Maple Avenue Suite 300 Dallas, T	State: Zip Code X 75019	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)

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SCHEDULE A1

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

The	Instruction Guide explains how to complete this for	orm.	1 Total pages Schedule A1: 6 of 12
2 FILER NAME Chad A West			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID)	#:)	7 Amount of contribution (\$)
04/23/2024	Kirk Wilson		500.00
Campaign Contribution	6 Contributor address; City; Standard Dallas, TX	State; Zip Code X 75229	
8 Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	#:)	Amount of contribution (\$)
04/25/2024	Robert Emery		100.00
Campaign Contribution		State; Zip Code	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	#:)	Amount of contribution (\$)
04/25/2024	Kathy Hewitt		1000.00
Campaign Contribution	Contributor address; City; S 1410 Yakimo Drive Dallas, TX	State; Zip Code X 75208	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 04/26/2024	Full name of contributor		Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address: 1717 ARTS PLAZA Suite 2311 DALLAS	State; Zip Code , TX 75201	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)

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SCHEDULE A1

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

ille	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 7 of 12
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Chad A West				
4 Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
04/28/2024	Philip Walker			1000.00
Campaign Contribution	6 Contributor address; 3731 Van Ness Lane	City; Dallas,	State; Zip Code , TX 75220	
8 Principal occup	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
04/30/2024	Chris Heinbaugh			100.00
Campaign Contribution	Contributor address; 1801 Annex Ave Suite 507	City;	State; Zip Code ,TX 75204	
Principal occupa	ation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
04/30/2024	Robert Wiley			250.00
Campaign Contribution	Contributor address; 2613 Thomas Avenue	City; Dallas,	State; Zip Code , TX 75204	
Principal occup	ation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 04/30/2024	Full name of contributor Cooper Koch	out-of-state PAC	C (ID#:)	Amount of contribution (\$) 250.00
Campaign Contribution	Contributor address; 2126 Kessler Parkway	City; Dallas,	State: Zip Code TX 75208	
	ation / Job title (See Instructions)		Employer (See Instruc	tions)

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SCHEDULE A1

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

The	Instruction Guide explains how to complete this for	m.	1 Total pages Schedule A1: 8 of 12
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Chad A West			
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
04/30/2024	Valerie Yanaros		200.00
Campaign Contribution	6 Contributor address; City; St 1000 Oak Hill Park Kennedale,	tate; Zip Code , TX 76060	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor		Amount of contribution (\$)
04/30/2024	Reid Beucler		1000.00
Campaign Contribution		state; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor)	Amount of contribution (\$)
04/30/2024	Reid Beucler		1500.00
Officeholder Contribution	Contributor address; City; St 6060 N Central Expressway Suite 12. Dallas, TX	tate; Zip Code 75206	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 05/01/2024	Full name of contributor □ out-of-state PAC (ID#:		Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; City; S 3910 Gillon Dallas, TX	itate: Zip Code 75208	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

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

The	Instruction Guide explains how to	complete this	form.	1 Total pages Schedule A1: 9 of 12
2 FILER NAME Chad A West				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	: (ID#:)	7 Amount of contribution (\$)
05/01/2024	Syd Hurley			1500.00
Officeholder Contribution	6 Contributor address; 3910 Gillon	City; Dallas,	State; Zip Code TX 75208	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date		out-of-state PAC	(ID#:)	Amount of contribution (\$)
05/01/2024	Steve Atkinson			1000.00
Campaign Contribution	Contributor address; 5926 Tree Shadow Trail	City; Dallas,	State; Zip Code TX 75252	
Principal occup	ation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
05/01/2024	Brent Rodgers			100.00
Campaign Contribution	Contributor address; 434 Brookhurst	City; Dallas,	State; Zip Code TX 75218	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date 05/01/2024	Full name of contributor Joshua Bosler	out-of-state PAC	(ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; 1930 Hi Line Drive Suite 271	3 City; Dallas,	TX 75207 Zip Code	
Principal occupation / Job title (See Instructions) Employer (See Instructions)				

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SCHEDULE A1

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

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 10 of 12
2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date 05/05/2024	5 Full name of contributor out-of-state PAC (ID#: Jane Weempe	7 Amount of contribution (\$) 1000.00
Campaign Contribution	6 Contributor address; City; State; Zip Code 1316 W Canterbury Court Dallas, TX 75208	
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instr	uctions)
Date 05/05/2024 Campaign	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
Contribution	1805 Record Crossing Road Dallas, TX 75235	
Principal occup	pation / Job title (See Instructions) Employer (See Instru	uctions)
Date 05/05/2024	Full name of contributor	Amount of contribution (\$) 1500.00
Officeholder Contribution	Contributor address; City; State; Zip Code 1805 Record Crossing Road Dallas, TX 75235	
Principal occup	pation / Job title (See Instructions) Employer (See Instru	uctions)
Date 05/05/2024	Full name of contributor	Amount of contribution (\$) 400.00
Campaign Contribution	Contributor address; City; State: Zip Code 3840 Wentwood Dallas, TX 75225	
Principal occup	pation / Job title (See Instructions) Employer (See Instru	uctions)

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SCHEDULE A1

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

The	Instruction Guide explains how to complete this fo	rm. 1 Total pages Schedule A1:
2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date 05/05/2024	5 Full name of contributor ☐ out-of-state PAC (ID) Chris Luna	#:
Campaign Contribution		State; Zip Code
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructions)
Date 05/05/2024	Full name of contributor	250.00
Campaign Contribution		State; Zip Code
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
Date 05/05/2024	Full name of contributor	#:) Amount of contribution (\$) 1000.00
Campaign Contribution		State; Zip Code X 75220
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
Date 05/05/2024	Full name of contributor	#:) Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; City; 634 Kessler Reserve Court Dallas, TX	State: Zip Code K 75208
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)

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SCHEDULE A1

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

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 12 of 12
2 FILER NAME Chad A West				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
05/05/2024	Jim Pitts			1000.00
Campaign Contribution	6 Contributor address; 3525 Turtle Creek Blvd	City;	State; Zip Code TX 75219	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
05/06/2024	Rudy Oeftering			500.00
Campaign Contribution	Contributor address; 3303 Throckmorton	City;	State; Zip Code TX 75219	
Principal occu	aation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occu	 pation / Job title (See Instructions)		Employer (See Instruc	tions)
	ATTACH ADDIT	IONAL COPIES (OF THIS SCHEDULE AS N	IEEDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 1 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Con	nmission Filers)
4 Date	5 Payee name			
01/16/2024	AmeriAir Center			
6 Amount (\$) 248.82 Campaign Funds for Campaign Expenditures	7 Payee address; 2500 Victory Avenue Dallas, TX 75219	City;	State; Z	ip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Fundraising	Fundraising		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expe	nse
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Offic	ce held
Date	Payee name			
01/16/2024	Berkleys			
Amount (\$) 28.88	Payee address; 634 West Davis Street Dallas, TX 75208	City;	State; Z	ip Code
Officeholder Funds for Officeholder Expenditures	054 West Davis Street Danas, 17(75200			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Gift	Gift for staff		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expe	nse
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Offic	e held
Date	Payee name			
	•			
01/16/2024	Oddfellows			
Amount (\$) 40.27	Payee address; 316 West Seventh Street Dallas, TX 75208	City;	State; Z	ip Code
Officeholder Funds for Officeholder Expenditures	510 West Seventii Street Danas, 1X /3208			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Meals	Meals		
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living exper	nse
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Offi	ce held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	,	,
1 Total pages Schedule F1: 2 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
01/16/2024	Lakeshore Learning Store			
6 Amount (\$) 57.26 Officeholder Funds for Officeholder Expenditures	7 Payee address; 14060 Dallas Parkway Dallas, TX 75240	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Gift	Gift for Local Teache	er	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/16/2024	Hero			
Amount (\$) 84.65	Payee address; 3090 Nowitzki Way Dallas, TX 75219	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Fundraising	Fundraising		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/17/2024	Ace Parking			
Amount (\$) 5.00	Payee address;	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	200 Crescent Court Dallas, TX 75201			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Travel	Travel in District		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 3 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/17/2024	AmeriAir Center		
6 Amount (\$) 15.55 Campaign Funds for Campaign Expenditures	7 Payee address; 2500 Victory Avenue Dallas, TX 75219	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Meals	Meals	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/17/2024	Ascension Café		
Amount (\$) 23.09	Payee address;	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	200 Crescent Court Suite 40 Dallas, TX 75201		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Meeting	Meeting with Advisor	or
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/19/2024	7 Eleven		
Amount (\$) 46.78	Payee address; 456 North Zang Boulevat0allas, TX 75208	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	430 North Zang Doutevalmanas, 1X 73206		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Travel	Travel in District	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	outer (errier a catego	.yot.lotou abovo,
1 Total pages Schedule F1: 4 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
01/19/2024	Ascension Café			
6 Amount (\$) 35.73	7 Payee address; 200 Crescent Court Suite 40	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	Dallas, TX 75201			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF	Meeting	Meeting with Adviso	r	
EXPENDITURE				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/19/2024	Ace Parking			
Amount (\$) 30.00	Payee address;	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	200 Crescent Court Dallas, TX 75201			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Travel	Travel in District		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/22/2024	Apple			
Amount (\$) 141.73	Payee address;	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	3606 S Tyler Street Dallas, TX 75224			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Supplies	Office Supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 5 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name	1		
01/22/2024	Dallas MTV			
6 Amount (\$) 15.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; 2911 Turtle Creek Boulevard Dallas, TX 75219	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Travel	Travel in District		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/22/2024	Society by Jackson Vaughn			
Amount (\$) 41.14	Payee address; 403 North Bishop AvenuĐallas, TX 75208	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	403 North Bishop I VendBallas, 171 /3200			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Meeting	Meeting with Commi	ssioner	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/22/2024	Tribal All Day Café			
Amount (\$) 47.42	Payee address;	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	263 North Bishop AvenuDallas, TX 75208			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Meeting	Meeting with Nhood	Leader	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 6 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
01/22/2024	Shop Bishop Art			
6 Amount (\$) 63.34 Officeholder Funds for Officeholder Expenditures	7 Payee address; 411 North Bishop AvenuĐallas, TX 75208	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Gift	Gift		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/22/2024	Blue Dahlia			
Amount (\$) 314.34	Payee address; 414 North Bishop AvenuÐallas, TX 75208	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	0-1	December		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Gift	Gift		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/23/2024	Ace Parking			
Amount (\$) 15.00	Payee address; 200 Crescent Court Dallas, TX 75201	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	Zoo Clescent Court Banas, 17/3201			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Travel	Travel in District		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 7 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	l	
01/23/2024	Dallas Fair Park		
6 Amount (\$) 134.86 Officeholder Funds for Officeholder Expenditures	7 Payee address; 3809 Grand Avenue Dallas, TX 75210	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Travel	Travel in District	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/23/2024	Toulouse Knox		
Amount (\$) 84.67	Payee address; 3314 Knox Street Dallas, TX 75205	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Fundraising	Meeting with Fundrai	ser
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/04/2024	THAIR CC		
01/24/2024	Tribal All Day Café	~ "	
Amount (\$) 45.86	Payee address; 263 North Bishop AvenuĐallas, TX 75208	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Meeting	Meeting with Commi	ssioner
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 8 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
01/24/2024	Chad West			
6 Amount (\$) 502.00 Campaign Funds for Campaign Expenditures	7 Payee address; 810 North Bishop AvenuĐallas, TX 75208	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/24/2024	Fast Signs			
Amount (\$) 66.00 Campaign Funds for Campaign Expenditures	Payee address; 6940 Marvin D Love Freeway Dallas, TX 75224	City;	State;	Zip Code
Campaign Expenditures	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Supplies	Supplies		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.		n, TX, officeholder living	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/24/2024	Mailchimp			
Amount (\$) 157.77 Campaign Funds for Campaign Expenditures	Payee address; P.O. Box 1130 Atlanta, GA 30112	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising	Marketing		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

oreal card ayment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 9 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
01/24/2024	La Comida			
6 Amount (\$) 692.54	7 Payee address; 1101 North Beckley Avenatlas, TX 75203	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Meeting	Kick off party for bo	ard members	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/25/2024	Ascension Café			
Amount (\$) 33.80	Payee address;	City;	State;	Zip Code
Officeholder Funds for	200 Crescent Court Suite 40 Dallas, TX 75201			
Officeholder Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Meeting	Meeting		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/25/2024	Hudson House Lake			
Amount (\$) 59.80	Payee address; 4448 Lovers Lane Dallas, TX 75225	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	THO LOVES Baile Ballas, 17(73223			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Fundraising	Dinner with Fundrais	ser	
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	, ,	
1 Total pages Schedule F1: 10 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
01/26/2024	Our Wellness			
6 Amount (\$) 435.00 Campaign Funds for Campaign Expenditures	7 Payee address; 207 South Tyler Street Dallas, TX 75208	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Gifts	Gifts for Fundraisers		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/29/2024	Cretias Bakery			
Amount (\$) 212.20	Payee address; 228 West Davis Street Dallas, TX 75208	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures		T =		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Meals	Cookies for staff		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/29/2024	Michaels			
Amount (\$) 39.99	Payee address; 4414 Dallas Fort Worth Turnpike	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	Dallas, TX 75211			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Supplies	Office Supplies		
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 11 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/29/2024	Encina		
6 Amount (\$) 63.85	7 Payee address; 614 West Davis Street Dallas, TX 75208	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Meals	Dinner with Nhood L	eader
EXI ENDITORE	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/30/2024	Hero		
Amount (\$) 95.66	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	3090 Nowitzki Way Dallas, TX 75219		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Fundraising	Dinner with Supporte	er
EXPENDITORE	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/31/2024	Starbucks Store		
Amount (\$) 26.14	Payee address;	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	2800 Oak Lawn Avenue Dallas, TX 75219		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Meeting	Coffee Meeting	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 12 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/31/2024	Extra Space Storage		
6 Amount (\$) 189.00 Campaign Funds for Campaign Expenditures	7 Payee address; 1931 Fort Worth AvenueDallas, TX 75208	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Storage	Storage Unit Rental	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/01/2024	Oak Cliff Lions Club		
Amount (\$) 100.00	Payee address; P.O. Box 4445 Dallas, TX 75208	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertising	Membership Fee	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/01/2024	Memnosyne Institutions		
Amount (\$) 100.00	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2902 Maple Avenue Dallas, TX 75201		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Donation	Sponsorship	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	omplete this form.		
1 Total pages Schedule F1: 13 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
02/01/2024	Dallas Morning News			
6 Amount (\$) 24.03 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1954 Commerce Street Dallas, TX 75201	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Subscriptions	Subscriptions		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/02/2024	Susana Jaimes			
Amount (\$) 1323.00	Payee address; 3606 S Tyler Street Dallas, TX 75224	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/02/2024	Wawa			
Amount (\$) 8.29	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	100 S Main Street Fort Lauderdale, FL 33305			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Travel	Travel out of district		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 14 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/02/2024	The Pub on the Drive		
6 Amount (\$) 96.58 Campaign Funds for Campaign Expenditures	7 Payee address; 2283 Wilton Drive Wilton Manors, FL 33305	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Travel	Travel out of district	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/02/2024	Sketches of Spain		
Amount (\$) 83.28 Officeholder Funds for Officeholder Expenditures	Payee address; 321 North Zang Boulevaldallas, TX 75208	City;	State; Zip Code
•	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Meeting	Dinner with Nhood L	eader
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/02/2024	Eagle Wilton Manors Bar		
Amount (\$) 20.00 Campaign Funds for Campaign Expenditures	Payee address; 2209 Wilton Drive Wilton Manors, FL 33305	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Travel	Travel out of district	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	1		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District
Travel Out Of District

Credit Card Payment	The Instruction Guide explains how to c	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 15 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/02/2024	Viasat In-Flight		
6 Amount (\$) 19.00	7 Payee address; 3606 S Tyler Street Dallas, TX 75224	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Travel	Travel out of district	
OF EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/05/2024	Cumberland Farms		
Amount (\$) 140.42	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	301 East Sunrise Boulevard Fort Lauderdale, FL 33304		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Travel	Travel out of district	
EXI ENDITORE	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/05/2024	Starbucks		
Amount (\$) 41.71	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	796 5th Avenue South Suite 101 Naples, FL 34102		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Travel	Travel out of district	
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 16 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
02/05/2024	Campiello Naples			
6 Amount (\$) 67.24 Campaign Funds for Campaign Expenditures	7 Payee address; 1177 3rd Street South Naples, FL 34102	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Travel	Travel out of district		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/05/2024	Mediterrano			
Amount (\$) 68.04 Campaign Funds for Campaign Expenditures	Payee address; 336 13th Avenue South Naples, FL 34102	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Travel	Travel out of district		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/05/2024	Extra Space Storage			
Amount (\$) 169.00 Campaign Funds for Campaign Expenditures	Payee address; 1931 Fort Worth AvenueDallas, TX 75208	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Storage	Storage Unit Rental		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (officer a sures	o.yo
1 Total pages Schedule F1: 17 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethic	s Commission Filers)
4 Date	5 Payee name			
02/05/2024	Vergina Res			
6 Amount (\$) 190.14 Campaign Funds for Campaign Expenditures	7 Payee address; 700 5th Avenue South Naples, FL 34102	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Travel	Travel out of district		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/06/2024	Bishop Dunne			
Amount (\$) 300.00	Payee address; 3900 Rugged Drive Dallas, TX 75224	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	3700 Rugged Dilve Dallas, 17, 73224			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Donation	Sponsorship		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/07/2024	Westin			
Amount (\$) 252.44	Payee address; 100 Pennsylvania Ave Washington, DC 20001	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	100 Tellisyivalia Ave Washington, De 20001			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Travel	Travel out of district		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	gexpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to e	complete this form.	Other (enter a catego	ny not listed above)
1 Total pages Schedule F1: 18 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
02/08/2024	Westin			
6 Amount (\$) 661.32	7 Payee address; 100 Pennsylvania Ave Washington, DC 20001	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Travel	Travel out of district		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/08/2024	Fig & Olive			
Amount (\$) 44.40	Payee address;	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	100 Pennsylvania Ave Washington, DC 20001			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Travel	Travel out of district		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/08/2024	CVS Pharmacy			
Amount (\$) 50.80	Payee address; 2009 8th Street Northwes Washington, DC 20001	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	2007 000 000001 101011110001 000010001, 2 0 20001			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Travel	Travel out of district		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 19 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
02/08/2024	Figleaf			
6 Amount (\$) 61.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1155 14th Street North West Washington, DC 20005	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Travel	Travel out of district		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/08/2024	Le Diplomate			
Amount (\$) 80.10 Officeholder Funds for Officeholder Expenditures	Payee address; 1601 14th Street North West Washington , DC 20009	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Travel	Travel out of district		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/08/2024	The Hay Adams			
Amount (\$) 130.00 Officeholder Funds for Officeholder Expenditures	Payee address; 800 16th Street North West Washington , DC 20006	City;	State;	Zip Code
-	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Travel	Travel out of district		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	ı expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	n, rx, emechadar nving	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to e	complete this form.	Other (enter a catego	ny not listed above)
1 Total pages Schedule F1: 20 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
02/09/2024	Westin			
6 Amount (\$) 36.80 Officeholder Funds for Officeholder Expenditures	7 Payee address; 100 Pennsylvania Ave Washington, DC 20001	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE	Travel	Travel out of district		
OF EXPENDITURE	Thire	Travel out of district		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/12/2024	Our Wellness			
Amount (\$) 250.00	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	207 South Tyler Street Dallas, TX 75208			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Gifts	Gifts for Fundraisers		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/12/2024	Stadium Dram LLC			
02/12/2024 Amount (\$)	Stadium Drop LLC	C:h	Ctata:	7in Code
Amount (\$) 164.36	Payee address; 1705 Emma Pearl Lane Little Elm, TX 75068	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Supplies	Supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Oreal Garar ayment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 21 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filer	rs)
4 Date	5 Payee name			
02/12/2024	7 Eleven			
6 Amount (\$) 65.01	7 Payee address; 111 Main Street Dallas, TX 75111	City;	State; Zip Code	
Officeholder Funds for Officeholder Expenditures		_		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Travel	Travel in District		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name I	Office sought	Office held	
Date	Payee name			
02/13/2024	Mammogram Poster Girls			
Amount (\$) 350.00	Payee address; 408 West Eighth Street Suite 103	City;	State; Zip Code	
Officeholder Funds for Officeholder Expenditures	Dallas, TX 75208			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Donation	Sweetheart Supper S	ponsor	
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.		in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
02/13/2024	Rosemont Dads Club			
Amount (\$) 350.00	Payee address; 207 North Willomet Ave Dadlas, TX 75208	City;	State; Zip Code	
Officeholder Funds for Officeholder Expenditures	207 North Willomet Averages, 12 75200			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Donation	Donation		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	outer (errier a satisge	.,
1 Total pages Schedule F1: 22 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
02/13/2024	Barnes & Noble			
6 Amount (\$) 153.63 Officeholder Funds for Officeholder Expenditures	7 Payee address; 7700 West Northwest Highway Suite 300 Dallas, TX 75225	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE	Gifts	Gifts for Nhood		
OF EXPENDITURE				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/14/2024	Apple			
Amount (\$) 3550.11	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	100 Main Street Dallas, TX 75111			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Supplies	Computer & Printer u	upgrades	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/15/2024	Tom Thumb			
Amount (\$) 156.31	Payee address; 315 South Hampton RoadDallas, TX 75208	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	•			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Meeting	Meals for supporters		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

lages/Contract Labor Other (enter a category not listed above)

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Orcal Card Faymon	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 23 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/20/2024	Oak Cliff Lions Club		
6 Amount (\$) 500.00	7 Payee address; P.O. Box 4445 Dallas, TX 75208	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Advertising	Membership Fee & D	Oonation
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name I	Office sought	Office held
Date	Payee name		
02/20/2024	Julie Johnson		
Amount (\$) 1000.00	Payee address; P.O. Box 1100 Dallas, TX 75100	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Donation	Donation	
EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/20/2024	Glottman		
Amount (\$) 42.80	Payee address; 2213 Northwest 2nd Ave Mia mi, FL 33127	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	,		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Gifts	Gifts for supporters	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 24 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers
4 Date	5 Payee name		
02/20/2024	Wynwood Tribe		
6 Amount (\$) 360.60 Campaign Funds for Campaign Expenditures	7 Payee address; 2200 Northwest 2nd Avenue Suite 107 Miami, FL 33127	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Fundraising	Dinner with Fundrais	ser
OF EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/20/2024	Casa Donna		
Amount (\$) 59.17	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	1737 North Bayshore Dr iVi ami, FL 33132		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Fundraising	Gifts for supporters	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/20/2024	Wynwood Koll		
Amount (\$) 142.30	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2719 Northwest 2nd Ave Mia mi, FL 33127		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Fundraising	Dinner with Fundrais	ser
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 25 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name			
02/21/2024	Bakan Restaurant			
6 Amount (\$) 300.24 Campaign Funds for Campaign Expenditures	7 Payee address; 2801 Northwest 2nd Ave Mia mi, FL 33127	City;	State; Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Fundraising	Dinner with Fundraiser		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
02/21/2024	Act Blue Julie Somerville			
Amount (\$) 1000.00	Payee address; 111 Main Street Dallas, TX 71111	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures	0-1	Description		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Donation	Donation		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
02/23/2024	Hyatt Regency Dallas			
Amount (\$) 20.32	Payee address; 111 Stemmons Freeway Dallas, TX 71111	City;	State; Zip Code	
Officeholder Funds for Officeholder Expenditures	TIT Stellinois Treeway Dallas, TX /TTT			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Meals	Meals		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 26 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/23/2024	Photographiq		
6 Amount (\$) 150.47 Officeholder Funds for Officeholder Expenditures	7 Payee address; 3111 Canton Street Suite 100 Dallas, TX 75226	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Supplies	Office Supplies	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/26/2024	DFW Federal Club		
Amount (\$) 350.00	Payee address; P.O. Box 191153 Dallas, TX 75219	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Donation	2024 Local Dues	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/26/2024	Parigi Restaurant		
Amount (\$) 137.67	Payee address;	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	3311 Oak Lawn Avenue Dallas, TX 75219		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Meals	Meals	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.		,
1 Total pages Schedule F1: 27 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
02/26/2024	Exxon			
6 Amount (\$) 65.64 Officeholder Funds for Officeholder Expenditures	7 Payee address; 3716 Maple Avenue Dallas, TX 75219	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Travel	Travel in District		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/26/2024	Mailchimp			
Amount (\$) 197.77	Payee address; P.O. Box 1144 Atlanta, GA 11111	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures		T 5		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising	Advertising		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/27/2024	Chipotle			
Amount (\$) 41.30	Payee address; 2242 Fort Worth AvenueDallas, TX 75211	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Meals	Meals		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 28 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
02/28/2024	Chad West			
6 Amount (\$) 280.00 Campaign Funds for Campaign Expenditures	7 Payee address; 810 North Bishop AvenuĐallas, TX 75208	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/29/2024	The Salty Donut			
Amount (\$) 55.66 Officeholder Funds for	Payee address; 414 West Davis Street Dallas, TX 75208	City;	State;	Zip Code
Officeholder Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Meals	Donuts for Council		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/29/2024	Tom Thumb			
Amount (\$) 93.31	Payee address; 315 South Hampton RoadDallas, TX 75208	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	313 South Hampton Roawanas, 174 73200			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Supplies	Office Supplies		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 29 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/01/2024	Dallas Morning News		
6 Amount (\$) 14.03 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1954 Commerce Street Dallas, TX 75201	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Subscriptions	Subscriptions	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/04/2024	Extra Space Storage		
Amount (\$) 198.00	Payee address; 1931 Fort Worth AvenueDallas, TX 75208	City;	State; Zip Code
Campaign Funds for Campaign Expenditures		5	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Storage	Storage Unit Rental	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/07/2024	Oak Cliff Lions Club		
Amount (\$) 150.00	Payee address;	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	P.O. Box 4445 Dallas, TX 75208		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertising	Membership Fee	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a catego	iry not listed above)
1 Total pages Schedule F1: 30 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
03/11/2024	Thompson Washington			
6 Amount (\$) 192.40	7 Payee address; 111 Main Street Washington, DC 32222	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Travel	Travel out of district		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
03/11/2024	Crew Club			
Amount (\$) 139.52	Payee address;	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	1321 14th Street North West Washington, DC 20005			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Supplies	Supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
03/11/2024	Chloe			
Amount (\$) 183.45	Payee address; 1331 4th Street SoutheastWashington, DC 20003	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	1551 Iai Succe Southeast Assimption, De 20005			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Travel	Travel out of district		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	euror (error a category).	
1 Total pages Schedule F1: 31 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics C	commission Filers)
4 Date	5 Payee name			
03/12/2024	Mountain Top			
6 Amount (\$) 102.00 Campaign Funds for Campaign Expenditures	7 Payee address; 100 South Park Avenue Suite C100 Breckenridge, CO 80424	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Donation	Donation		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living ex	pense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Of	ffice held
Date	Payee name			
03/12/2024	Chad West			
Amount (\$) 520.00	Payee address; 810 North Bishop AvenuĐallas, TX 75208	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Contract Labor	Reimbursement		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living ex	pense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Of	ffice held
Date	Payee name			
03/18/2024	Walgreens			
Amount (\$) 49.10	Payee address;	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	1306 North Beckley Ave Dad las, TX 75208			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Supplies	Supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living ex	pense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	0	office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	outer (enter a sutege	.,
1 Total pages Schedule F1: 32 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date 03/18/2024	5 Payee name Eatzis			
6 Amount (\$) 31.34 Officeholder Funds for Officeholder Expenditures	7 Payee address; 3403 Oak Lawn Avenue Dallas, TX 75219	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Gifts	Meals for Newly Pregnant Family		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
03/18/2024	Round Up Saloon			
Amount (\$) 43.50 Officeholder Funds for Officeholder Expenditures	Payee address; 3912 Cedar Springs RoaDallas, TX 75219	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Meals	Meals		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
03/21/2024	Cretias Bakery			
Amount (\$) 102.00 Officeholder Funds for Officeholder Expenditures	Payee address; 228 West Davis Street Dallas, TX 75208	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Gifts	Gifts		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 33 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		<u> </u>
03/22/2024	Katy Seitzler		
6 Amount (\$) 257.50 Campaign Funds for	7 Payee address; 217 Sycamore Creek Roa 4 Illen, TX 75002	City;	State; Zip Code
Campaign Expenditures 8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Contract Labor	D1 Bond Project Vid	leo Work
OF EXPENDITURE	Contract Labor	Di Bona Project Via	CO WOIK
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/25/2024	Container Store		
Amount (\$)	Payee address;	City;	State; Zip Code
67.28 Officeholder Funds for Officeholder Expenditures	7700 West Northwest Highway Dallas, TX 75225		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Supplies	Storage containers	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/25/2024	Mailchimp		
Amount (\$) 307.77	Payee address; P.O. Box 1333 Atlanta, GA 30222	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Advertising	Advertising	
EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.			
1 Total pages Schedule F1: 34 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)	
4 Date	5 Payee name				
03/26/2024	Cibo Divino				
6 Amount (\$) 148.16 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1868 Sylvan Avenue Suite D100 Dallas, TX 75208	City;	State;	Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF EXPENDITURE	Meeting	Meals with Nhood leaders			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name				
04/01/2024	Dallas Morning News				
Amount (\$) 34.03 Officeholder Funds for	Payee address; 1954 Commerce Street Dallas, TX 75201	City;	State;	Zip Code	
Officeholder Expenditures					
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Subscriptions	Subscriptions			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name				
04/01/2024	Tribal All				
Amount (\$) 162.18	Payee address;	City;	State;	Zip Code	
Officeholder Funds for Officeholder Expenditures	263 North Bishop AvenuDallas, TX 75208				
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Meetings	Lunch with Commiss	sioners		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held	
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Guioi (cinioi a calego	
1 Total pages Schedule F1: 35 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
04/01/2024	Tom Thumb			
6 Amount (\$) 96.20 Officeholder Funds for Officeholder Expenditures	7 Payee address; 315 South Hampton RoaDallas, TX 75208	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Supplies	Supplies		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	ı expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
04/01/2024	The Canary			
Amount (\$) 170.00	Payee address; 4609 West Lovers Lane Dallas, TX 75209	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Gifts	Gifts		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
04/01/2024	Extra Space Storage			
Amount (\$) 98.00	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	1931 Fort Worth AvenueDallas, TX 75208			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Storage	Storage Unit Rental		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 36 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
04/03/2024	Elmwood Coffee			
6 Amount (\$) 6.41 Officeholder Funds for Officeholder Expenditures	7 Payee address; 111 S Edgefield Avenue Dallas, TX 75224	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Meals	Meals		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
04/03/2024	The Canary			
Amount (\$) 249.50	Payee address; 4609 West Lovers Lane Dallas, TX 75209	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Gifts	Gifts		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
04/05/2024	Round Up Saloon			
Amount (\$) 56.50	Payee address;	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	3912 Cedar Springs RoadDallas, TX 75219			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Meals	Meals		
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	Other (enter a categor	y not listed above)
1 Total pages Schedule F1: 37 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
04/08/2024	Elmwood Coffee			
6 Amount (\$) 8.50 Officeholder Funds for	7 Payee address; 111 S Edgefield Avenue Dallas, TX 75224	City;	State;	Zip Code
Officeholder Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE	Meals	Meals		
OF EXPENDITURE				
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	(Office held
Date	Payee name			
04/08/2024	Cretias Bakery			
Amount (\$)	Payee address;	City;	State;	Zip Code
59.10	228 West Davis Street Dallas, TX 75208			
Officeholder Funds for Officeholder Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Gifts	Gifts		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	C	Office held
Date	Payee name			
04/08/2024	Another Round			
Amount (\$) 15.99	Payee address; 660 Fort Worth Avenue Suite 100	City;	State;	Zip Code
Officeholder Funds for	Dallas, TX 75208			
Officeholder Expenditures	, , , , , , , , , , , , , , , , , , ,			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Meals	Meals		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
experience to belief 0/01	•			
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 38 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
04/08/2024	Hudson House Lake			
6 Amount (\$) 68.75 Officeholder Funds for Officeholder Expenditures	7 Payee address; 4040 Abrams Road Dallas, TX 75214	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Meals	Meals		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
04/09/2024	Pizza Hut			
Amount (\$) 130.62	Payee address; 100 S Tyler Street Dallas, TX 75208	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures		D : #		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Meeting	Pizza for Volunteers		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
04/10/2024	Ascension C			
Amount (\$) 83.09	Payee address;	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	1621 Oak Lawn Avenue Dallas, TX 75207			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Meeting	Coffee Meeting		
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	Carer (errier a carege	ny notnoted above,
1 Total pages Schedule F1: 39 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name	l		
04/11/2024	Village Burger			
6 Amount (\$) 60.33 Campaign Funds for Campaign Expenditures	7 Payee address; 3699 McKinney Avenue Suite C325 Dallas, TX 75204	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE	Fundraising	Fundraisng meeting		
OF EXPENDITURE				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
04/12/2024	Cretias Bakery			
Amount (\$) 13.20	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	228 West Davis Street Dallas, TX 75208			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Gifts	Gifts		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
04/22/2024	Cibo Divino			
Amount (\$)	Payee address;	City;	State;	Zip Code
Officeholder Funds for	1868 Sylvan Avenue Suite D100 Dallas, TX 75208	J.,	State,	_,p
Officeholder Expenditures	Danas, 17, 75200			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Meeting	Meeting with Board I	Member	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OF	ł 			
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to e	complete this form.	Other (enter a catego	ry not listed above)
1 Total pages Schedule F1: 40 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
04/22/2024	Cretias Bakery			
6 Amount (\$) 32.20	7 Payee address; 228 West Davis Street Dallas, TX 75208	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE	Gifts	Gifts		
OF EXPENDITURE				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
04/22/2024	Lowes			
Amount (\$) 284.60	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	8520 South Hampton Rolaballas, TX 75208			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Storage	Storage		
EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	(Office held
Date	Payee name			
04/25/2024	Walgreens			
Amount (\$) 35.08	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	1306 North Beckley Ave Dadlas, TX 75208			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Supplies	Supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	outer (enter a catego	.,
1 Total pages Schedule F1: 41 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
04/25/2024	Oddfellows			
6 Amount (\$) 50.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; 316 West Seventh Street Dallas, TX 75208	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE	Gifts	Gifts		
OF EXPENDITURE				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
04/25/2024	Mailchimp			
Amount (\$) 157.77	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	111 Main Street Atlanta, GA 11111			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising	Advertising		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
04/29/2024	Ascension C			
Amount (\$) 13.25	Payee address;	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	1621 Oak Lawn Avenue Dallas, TX 75207			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Meeting	Meeting		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	caller (circuit a subagery methoda asserts)
1 Total pages Schedule F1: 42 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
04/30/2024	Apple		
6 Amount (\$) 253.55 Campaign Funds for Campaign Expenditures	7 Payee address; 111 Main Street Dallas, TX 75222	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Supplies	Phone upgrade	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
04/30/2024	7 Eleven		
Amount (\$) 7.28	Payee address; 456 North Zang Boulevafdallas, TX 75208	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Meals	Meals	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/01/2024	Dallas Morning News		
Amount (\$) 34.03	Payee address; 1954 Commerce Street Dallas, TX 75201	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	1754 Commerce Succe Damas, 17, 75201		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Subscriptions	Subscriptions	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 43 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/01/2024	Chips Hamburgers		
6 Amount (\$) 59.75 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1605 North Beckley Ave Dadlas, TX 75208	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Meeting	Lunch meeting	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/01/2024	Oil and Cotton		
Amount (\$) 800.00	Payee address; 2313 Beatrice Street Suite 100	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	Dallas, TX 75208		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Donation	Donation	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/01/2024	Tribal All		
Amount (\$) 20.84	Payee address;	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	263 North Bishop AvenuDallas, TX 75208		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Meeting	Lunch Meeting	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 44 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name			
05/01/2024	Chad West PLLC			
6 Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures	7 Payee address; P.O. Box 795 Midlothian, TX 76065	City;	State; Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Rent	Office Rent		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
05/02/2024	Express Shop			
Amount (\$) 25.26	Payee address; 200 Crescent Court Dallas, TX 75205	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Meals	Meals		
EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
	•			
05/02/2024	Capital Grille			
Amount (\$) 148.76	Payee address;	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures	500 Crescent Court Dallas, TX 75201			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Fundraising	Meeting with Donor		
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 45 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
05/02/2024	Checking Withdrawal			
6 Amount (\$) 300.00 Campaign Funds for Campaign Expenditures	7 Payee address; P.O. Box 333 Dallas, TX 75213	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
05/03/2024	Chipotle			
Amount (\$) 19.21	Payee address; 2705 McKinney Avenue Dallas, TX 75204	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Meals	Meals		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
05/03/2024	Honor Bar			
Δ (Δ)	Payee address;	City	State;	Zip Code
Amount (\$) 61.00	26 Highland Park VillageDallas, TX 75205	City;	State,	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Fundraising	Lunch with Donor		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 46 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/06/2024	Elmwood Coffee		
6 Amount (\$) 54.22 Officeholder Funds for	7 Payee address; 111 Main Street Dallas, TX 75224	City;	State; Zip Code
Officeholder Expenditures	(1)	1425	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Gifts	Gifts	
EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/06/2024	Walgreens		
Amount (\$) 143.24	Payee address;	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	1306 North Beckley Avenadlas, TX 75208		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Supplies	Supplies	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/06/2024	Little Ceasars		
Amount (\$) 44.42	Payee address;	City;	State; Zip Code
Campaign Funds for	2142 Fort Worth AvenueDallas, TX 75208		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Meeting	Dinner for volunteers	\$
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 47 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/06/2024	Melt Ice Cream		
6 Amount (\$) 26.76 Officeholder Funds for Officeholder Expenditures	7 Payee address; 405 North Bishop AvenuĐallas, TX 75208	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Meals	Meals	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/06/2024	Edible		
Amount (\$) 438.40	Payee address; P.O. Box 444 Atlanta, GA 44444	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Gifts	Gifts for Fundraisers	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/06/2024	Extra Space Storage		
Amount (\$) 98.00	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	111 Fort Worth Avenue Dallas, TX 75203		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Storage	Storage	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/Oh		SS SSUGIN	0.1100 1.010
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 48 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/06/2024	Cretias Bakery		
6 Amount (\$) 252.00	7 Payee address; 228 West Davis Street Dallas, TX 75208	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Gifts	Gifts	
OF EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/06/2024	Cenzos		
Amount (\$) 384.18	Payee address;	City;	State; Zip Code
	P.O. Box 1323 Dallas, TX 75208		
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Meeting	Meeting with Suppor	ters
EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/06/2024	The Dallas Assembly		
Amount (\$) 509.85	Payee address; 12900 Preston Road Suite 1210	City;	State; Zip Code
Campaign Funds for	Dallas, TX 75230		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Membership	Description Membership Fees	
PURPOSE OF EXPENDITURE			
OF		Membership Fees	n, TX, officeholder living expense
OF EXPENDITURE Complete ONLY if direct	Membership Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name	Membership Fees	n, TX, officeholder living expense Office held
OF EXPENDITURE	Membership Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name	Membership Fees Check if Austin	<u> </u>

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 49 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	l	
05/07/2024	Our Wellness		
6 Amount (\$) 130.00	7 Payee address; 207 South Tyler Street Dallas, TX 75208	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	207 South Tyler Street Danas, TA 75200		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Gifts	Gifts	
OF EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/08/2024	Hudson House Lake		
Amount (\$) 84.95	Payee address;	City;	State; Zip Code
Officeholder Funds for	4040 Abrams Road Dallas, TX 75214		
Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Meals	Dinner with Board M	lember
EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
		Ü	0000.4
Date	Payee name		
Date			
Date 05/09/2024			
	Payee name Victory Park Payee address;	City;	State; Zip Code
05/09/2024 Amount (\$) 5.00	Payee name Victory Park		
05/09/2024	Payee name Victory Park Payee address;		
05/09/2024 Amount (\$) 5.00 Officeholder Funds for	Payee name Victory Park Payee address;		
05/09/2024 Amount (\$) 5.00 Officeholder Funds for Officeholder Expenditures	Payee name Victory Park Payee address; 2323 Victory Avenue Dallas, TX 75219	City;	State; Zip Code
05/09/2024 Amount (\$) 5.00 Officeholder Funds for Officeholder Expenditures	Payee name Victory Park Payee address; 2323 Victory Avenue Dallas, TX 75219 Category (See Categories listed at the top of this schedule)	City;	State; Zip Code
05/09/2024 Amount (\$) 5.00 Officeholder Funds for Officeholder Expenditures PURPOSE OF	Payee name Victory Park Payee address; 2323 Victory Avenue Dallas, TX 75219 Category (See Categories listed at the top of this schedule)	City; Description Transportation in Dis	State; Zip Code
O5/09/2024 Amount (\$) 5.00 Officeholder Funds for Officeholder Expenditures PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee name Victory Park Payee address; 2323 Victory Avenue Dallas, TX 75219 Category (See Categories listed at the top of this schedule) Travel Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name	City; Description Transportation in Dis	State; Zip Code
O5/09/2024 Amount (\$) 5.00 Officeholder Funds for Officeholder Expenditures PURPOSE OF EXPENDITURE	Payee name Victory Park Payee address; 2323 Victory Avenue Dallas, TX 75219 Category (See Categories listed at the top of this schedule) Travel Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name	City; Description Transportation in Dis	State; Zip Code strict n, TX, officeholder living expense

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 50 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/09/2024	Chipotle		
6 Amount (\$) 29.39 Campaign Funds for Campaign Expenditures	7 Payee address; 2242 Fort Worth AvenueDallas, TX 75211	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Meals	Meals	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/13/2024	Ascension C		
Amount (\$) 86.29	Payee address; 1621 Oak Lawn Avenue Dallas, TX 75207	City;	State; Zip Code
Campaign Funds for Campaign Expenditures		5	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Fundraising	Meeting with Donor	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/13/2024	Elmwood Coffee		
Amount (\$) 127.06	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	111 S Edgefield Avenue Dallas, TX 75224		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Gifts	Gifts	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 51 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
05/13/2024	Warwick Melrose			
6 Amount (\$) 214.18 Campaign Funds for Campaign Expenditures	7 Payee address; 3015 Oak Lawn Avenue Dallas, TX 75219	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Meeting	Meeting		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
05/13/2024	Mi Cocina			
Amount (\$) 154.98	Payee address; 778 Highland Park Villa@allas, TX 75205	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Fundraising	Dinner with Supporte	er	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
	-			
05/14/2024	Apple			
Amount (\$) 275.55	Payee address; 111 Main Street Santa Monica, CA 11111	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	111 Maii Sueet Santa Monica, CA 11111			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Supplies	Supplies		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	,	•
1 Total pages Schedule F1: 52 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
05/14/2024	Blair Foundation Charities			
6 Amount (\$) 250.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; P.O. Box 380071 Duncanville, TX 75183	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Donation	Hole Sponsorship		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
05/17/2024	Texas Theater			
Amount (\$) 300.00	Payee address; 231 Jefferson Boulevard Dallas, TX 75208	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Donation	Donation		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
05/17/2024	Whole Foods Market			
Amount (\$) 139.68	Payee address; 2510 McKinney Avenue Dallas, TX 75201	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Meeting	Volunteer Meals		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 53 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission F	Filers)
4 Date	5 Payee name			
05/17/2024	7 Eleven			
6 Amount (\$) 57.28 Officeholder Funds for Officeholder Expenditures	7 Payee address; 111 Main Street Dallas, TX 75208	City;	State; Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Travel	Transportation in Dis	trict	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
05/20/2024	Kingsmen Coffeee			
Amount (\$) 16.00 Officeholder Funds for	Payee address; 714 West Wheatland Roaduncanville, TX 75116	City;	State; Zip Code	
Officeholder Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Meals	Meals		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
05/20/2024	Cretias Bakery			
Amount (\$) 124.20	Payee address; 228 West Davis Street Dallas, TX 75208	City;	State; Zip Code	
Officeholder Funds for Officeholder Expenditures	220 West Davis Succe Dallas, 17/3200			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Gifts	Gifts		
-	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense	
Commisto ONUV if dire !	Candidate / Officeholder name	Office sought	Office held	
Complete ONLY if direct expenditure to benefit C/OF		Onice sought	Опісе пеіа	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 54 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/20/2024	Moxies Grill & Bar		
6 Amount (\$) 145.15 Campaign Funds for Campaign Expenditures	7 Payee address; 100 Crescent Court Dallas, TX 75201	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Fundraising	Donor Meeting	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/20/2024	Enos Pizza		
Amount (\$) 55.47	Payee address; 407 North Bishop AvenuĐallas, TX 75208	City;	State; Zip Code
Campaign Funds for Campaign Expenditures		1	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Meeting	Meals for Volunteers	3
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/21/2024	Stevens Park		
Amount (\$) 120.78	Payee address; 1005 North Montclair Avenue	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	Dallas, TX 75208		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Meeting	Meals for supporters	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	outer (eriter a satisge	.,
1 Total pages Schedule F1: 55 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name	ı		
05/21/2024	Tribal All			
6 Amount (\$) 152.03 Officeholder Funds for Officeholder Expenditures	7 Payee address; 263 North Bishop AvenuĐallas, TX 75208	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE	Meeting	Meeting with Board I	Member	
OF EXPENDITURE				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
05/28/2024	American Airlines Center			
Amount (\$) 241.98	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	100 Victory Avenue Dallas, TX 75201			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Fundraising	Fundraising		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
05/29/2024	D. (El			
05/28/2024 Amount (\$) 167.00	Dirt Flowers Payee address;	City;	Ctata	7in Codo
107.99	417 North Bishop AvenuÐallas, TX 75208	City,	State;	Zip Code
Officeholder Funds for Officeholder Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Gifts	Gifts		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 56 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/28/2024	Mailchimp		
6 Amount (\$) 157.77 Campaign Funds for Campaign Expenditures	7 Payee address; 111 Main Street Atlanta, GA 11111	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Advertising	Advertising	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/29/2024	Apple		
Amount (\$) 375.07	Payee address; 111 Main Street Carlsbad, CA 00011	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures		T	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Supplies	Equipment	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
06/03/2024	Dallas Morning News		
Amount (\$) 14.03	Payee address; 1954 Commerce Street Dallas, TX 75201	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	1754 Commerce Succe Damas, 174 75201		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Subscriptions	Subscriptions	
EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	canon (enter a satisgery not not	
1 Total pages Schedule F1: 57 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commi	ssion Filers)
4 Date 06/03/2024	5 Payee name Qualigraphics Inc			
6 Amount (\$) 698.72 Campaign Funds for Campaign Expenditures	7 Payee address; 934 Stevens Woods CourDallas, TX 75208	City;	State; Zip	Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Notecards for Campa	ign	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office I	neld
Date	Payee name			
06/03/2024 Amount (\$) 243.27 Campaign Funds for Campaign Expenditures	Barnes and Nobles Payee address; 7700 West Northwest Highway Suite 300 Dallas, TX 75225	City;	State; Zip	Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description Gifts for Volunteers		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office I	neld
Date 06/03/2024	Payee name Cheesecake			
Amount (\$) 43.70 Campaign Funds for Campaign Expenditures	Payee address; 7700 West Northwest Highway Dallas, TX 75225	City;	State; Zip	Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meals	Description Meals		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office	held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 58 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
06/03/2024	Extra Space Storage			
6 Amount (\$) 98.00 Campaign Funds for Campaign Expenditures	7 Payee address; 1931 Fort Worth AvenueDallas, TX 75208	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Storage	Storage		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
06/03/2024	Qualigraphics Inc			
Amount (\$) 628.72 Campaign Funds for Campaign Expenditures	Payee address; 2727 Lyndon B Johnson Freeway Suite 780A Dallas, TX 75234	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising	Campaign Expense		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
06/05/2024	Beverleys			
Amount (\$) 180.00 Campaign Funds for Campaign Expenditures	Payee address; 3215 North Fitzhugh Avenue Dallas, TX 75204	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Fundraising	Dinner with Donor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 59 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
06/06/2024	Chad West		
6 Amount (\$) 837.69 Campaign Funds for Campaign Expenditures	7 Payee address; 810 North Bishop AvenuĐallas, TX 75208	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
06/07/2024	Tribal All		
Amount (\$) 33.67	Payee address; 263 North Bishop AvenuĐallas, TX 75208	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Meeting	Meeting with Board	Member
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
06/07/2024	Toms Watch		
Amount (\$) 90.67	Payee address;	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	1601 19th Street Suite 100 Denver, CO 80202		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Travel	Travel out of district	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	Guioi (Giller a Gallegi				
1 Total pages Schedule F1: 60 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)				
4 Date	5 Payee name	l					
06/10/2024	Blue Sparrow						
6 Amount (\$) 5.40	7 Payee address;	City;	State;	Zip Code			
Officeholder Funds for Officeholder Expenditures	3070 Blake Street Suite 180 Denver, CO 80205						
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description					
PURPOSE	Travel	Travel out of district					
OF EXPENDITURE							
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense			
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held			
Date	Payee name						
06/10/2024	Death and Company						
Amount (\$) 19.69	Payee address;	City;	State;	Zip Code			
Officeholder Funds for Officeholder Expenditures	1280 25th Street Denver, CO 80205						
	Category (See Categories listed at the top of this schedule)	Description					
PURPOSE OF EXPENDITURE	Travel	Travel out of district					
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	heck if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held					
Date	Payee name						
0 < /1 0 /200 4	D D						
06/10/2024	Recess Beer						
Amount (\$) 25.92	Payee address; 2715 17th Street Suite 103	City;	State;	Zip Code			
Officeholder Funds for Officeholder Expenditures	Denver, CO 80211						
	Category (See Categories listed at the top of this schedule)	Description					
PURPOSE OF EXPENDITURE	Travel	Travel out of district					
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense					
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held			
expenditure to benefit C/OF	ł 						
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED							

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	Garer (errier a satege	.,			
1 Total pages Schedule F1: 61 of 62	2 FILER NAME Chad A West	3 Filer ID (Ethics Commission Filers)					
4 Date	5 Payee name		<u> </u>				
06/10/2024	The Dallas Assembly						
6 Amount (\$) 1030.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; 12900 Preston Road Suite 1210 Dallas, TX 75230	City;	State;	Zip Code			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description					
PURPOSE OF	Membership	Member Fee					
EXPENDITURE							
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held			
Date	Payee name						
06/11/2024	White Rock Ale House						
Amount (\$) 44.66	Payee address;	City;	State;	Zip Code			
Officeholder Funds for Officeholder Expenditures	111 N Beckley Ave Dallas, TX 75208						
	Category (See Categories listed at the top of this schedule)	Description					
PURPOSE OF EXPENDITURE	Meeting	Meeting					
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held			
Date	Payee name						
0 < /1.2 /202.4	77 7 JAN						
06/12/2024	Tribal All	Cit.	Ctata	Zin Codo			
Amount (\$) 70.70	Payee address; 263 North Bishop AvenuÐallas, TX 75208	City;	State;	Zip Code			
Officeholder Funds for Officeholder Expenditures							
	Category (See Categories listed at the top of this schedule)	Description					
PURPOSE OF EXPENDITURE	Meeting	Meeting					
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED							

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 62 of 62	2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filer	s)
4 Date	5 Payee name			
06/20/2024	Our Wellness			
6 Amount (\$) 110.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; 207 South Tyler Street Dallas, TX 75208	City;	State; Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Gifts	Gifts		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
06/25/2024	Mailchimp			
Amount (\$) 271.63	Payee address; 111 Main Street Atlanta, GA 44444	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising	Advertising		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
06/28/2024	Pay Pal NOCUPP			
Amount (\$) 400.00	Payee address;	City;	State; Zip Code	
Officeholder Funds for Officeholder Expenditures	111 Main Street Dallas, TX 75208			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Donation	Donation		
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	