CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 58
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Mr Tennell NICKNAME LAST Atkins	MI 	OFFICE USE ONLY Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address		Oallas TX 75232	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (469) 417 8939	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST	МІ	Receipt # Amount \$
NAME	NICKNAME LAST Milliner	SUFFIX	Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / St. 1407 Laura Lane	JITE #; CITY; STATE; Dallas TX 75241	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (214) 371 7482	EXTENSION	
9 REPORT TYPE	January 15 X 30th day before el		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 01 / 01 / 2021	THROUGH 03	Day Year 22 / 2021
11 ELECTION	ELECTION DATE Month Day Year X Primary General	ELECTION TYPE Runoff Other Description Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known Council District 8	
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME		15 F	Filer ID (Ethics Commission Filers)		
Mr Tennell Atkins					
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
	SPECIFIC	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages					
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 19585.00		
EXPENDITURE TOTALS	RE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00		
	4. TOTAL POLITICAL EXPENDITURES \$ 25464.16				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 29918.32				
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$ 15000.00		
18 AFFIDAVIT		I swear, or affirm, under penalty of perjuitrue and correct and includes all informatunder Title 15, Election Code.			
		ELECTRONICALLY CER	TIFIED		
		Signature of Candida	te or Officeholder		
AFFIX NOTARY STAM	P/SEALABOVE				
Sworn to and subsc	ribed before me, k	by the said Mr Tennell Atkins	, this the1st		
		to certify which, witness my hand and seal of office.			
Signature of officer a	administering oath	Printed name of officer administering oath	Title of officer administering oath		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	19 FILER NAME Mr Tennell Atkins 20 Filer ID (Ethics Con			mmission Filers)
21		JLE SUBTOTALS F SCHEDULE		SUBTOTAL AMOUNT
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 18,585.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 1,000.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00
4.		SCHEDULE E: LOANS		\$ 0.00
5.	5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			\$ 25,464.16
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			\$ 0.00
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			\$ 0.00
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			\$ 0.00
9.	9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			\$ 0.00
10.	10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			\$ 0.00
11.	11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			\$ 0.00
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT RETURNED TO FILER	IONS	\$ 0.00

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 1 of 7
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkir	S		
4 Date	5 Full name of contributor out-of-state PAC (ID	D#:)	7 Amount of contribution (\$)
01/01/2021	AECOM PAC		1000.00
	6 Contributor address; City; State;	Zip Code	
	2000 K Street Suite 800 Washingt	ton, DC 20008	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/25/2021	Yueh Sam Yang		200.00
	Contributor address; City; State;	Zip Code	
	201 E Arapaho Rd Richardso	on, TX 75081	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC (ID	D#:)	Amount of contribution (\$)
02/25/2021	Eric Chao-Han Ko		250.00
	Contributor address; City; State; 5916 Crownover Court Plano, TX	•	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/25/2021	Helene YC Lee		200.00
		Zip Code on, TX 75080	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this for	rm.	1 Total pages Schedule A1: 2 of 7
2 FILER NAME Mr Tennell Atkir	is		3 Filer ID (Ethics Commission Filers)
4 Date 03/11/2021	 Full name of contributor □ out-of-state PAC (ID# Metroplex Association of Realtors, Inc. Contributor address; City; State; 8201 N Stemmons Frwy Dallas, TX 	Zip Code	7 Amount of contribution (\$) 2500.00
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructi	ions)
Date 03/16/2021	Full name of contributor	Zip Code	Amount of contribution (\$) 1000.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 03/16/2021	Full name of contributor ut-of-state PAC (ID# Mohamad Akhavizadeh Contributor address; City; State; 9400 N Central Expressway Suite 47Dallas, TX	Zip Code	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 03/16/2021		·	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3 of 7
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkin	ns		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
01/08/2021	Alfred Herron		250.00
	6 Contributor address; City; State; Zip	Code	
	1221 Bar Harbor Dallas, TX 75	232	
8 Principal occu	pation / Job title (See Instructions) 9 En	nployer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
01/02/2021	eddie reeves		250.00
	Contributor address; City; State; Zip	Code	
	9438 spring hollow dr Dallas, TX 75	243	
Principal occup	pation / Job title (See Instructions)	nployer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
03/01/2021 Apartment Association of Greater Dallas-PAC			2500.00
	Contributor address; City; State; Zip 5728 LBJ Frwy Suite 100 Dallas, TX 75	Code 240	
Principal occu	pation / Job title (See Instructions)	nployer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)
02/23/2021	Yueh Sam Yang		200.00
	Contributor address; City; State; Zip of 201 E Arapaho Rd Richardson, T	Code	
Principal occup	aation / Job title (See Instructions)	nployer (See Instruction	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 4 of 7
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkir	s		
4 Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7 Amount of contribution (\$)
02/08/2021	Jim S Lake Jr		1000.00
	6 Contributor address; City; State;	Zip Code	
	1704 W Colorado Blvd Dallas, T	X 75208	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (IE	D#:)	Amount of contribution (\$)
01/02/2021	Michael B Russell		500.00
01/02/2021	Contributor address; City; State;	Zip Code	300.00
	1065 Peach Street NE Suite 3104 Atlanta, G	GA 30309-3980	
Principal occur	ation / Job title (See Instructions)	Employer (See Instructi	ions)
i inicipal occup	anony oob the (occ mondenons)	Employer (See manden	013)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/26/2021	Janny Hyun Joo Suh		
01/20/2021	Contributor address; City; State;	Zip Code	1000.00
		X 75063-5513	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/18/2021	Mary Suhm	·	250.00
	Contributor address; City; State; 943 Liberty St Dallas, T.	Zip Code	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 5 of 7
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkir	s		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
01/05/2021	Kennon L Tenison		1000.00
01/03/2021	6 Contributor address; City; State;	Zip Code	1000.00
	4041 W Wheatland Rd Dallas, 7	TX 75237	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ione)
• Filicipal occu	valion / 300 title (See instructions)	g Employer (See Instructi	ons)
Date	Full name of contributor uut-of-state PAC ((ID#:)	Amount of contribution (\$)
01/06/2021	Ruby L Lewis		1000.00
01/00/2021	Contributor address; City; State;	Zip Code	1000.00
	1207 N Bishop Dallas, 7	TX 75208	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date		(ID#:)	Amount of contribution (\$)
03/02/2021	Kwang Sim Chong		1000.00
	Contributor address; City; State;	•	
	927 Condor Dr Coppell.	, TX 75019	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:	Amount of contribution (\$)
03/08/2021	Joan Waine)	500.00
	Contributor address; City; State;	Zip Code	
		TX 75238	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 6 of 7
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkir	S		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/03/2021	Arnold Gachman		250.00
03/03/2021	6 Contributor address; City; State;	Zip Code	250.00
	1229 Shady Oaks Ln Fort Wo	orth, TX 76107-3657	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor	[ID#:)	Amount of contribution (\$)
02/25/2021	david g luther jr		250.00
	Contributor address; City; State;	Zip Code	
	619 kessler springs dr Dallas, T	ΓX 75208	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/01/2021	mason c brown III		1000.00
	Contributor address; City; State; P.O. Box 29615 Dallas, 7	Zip Code ΓΧ 75229	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/27/2021	Veletta Forsythe		250.00
		Zip Code ΓX 75223	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 7 of 7
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkir	ns		
4 Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
02/13/2021	Larry Offutt		100.00
	6 Contributor address; City; State	; Zip Code	
	6038 Bryan Pkwy Dallas,	TX 75206	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor	C (ID#:)	A
Date		, (1811)	Amount of contribution (\$)
01/01/2021	Chris Heinbaugh		35.00
	Contributor address; City; State	e; Zip Code	
	1429 Caddo Street Suite G Dallas,	TX 75204	
Principal occup	 pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state_PAC	; (ID#:)	Amount of contribution (\$)
03/15/2021	Joanna St Angelo		100.00
03/13/2021			100.00
	Contributor address; City; State 3630 Harry Hines Blvd Dallas,	TX 75219	
	Joso Harry Hines Biva Banas,	1X 1321)	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor) (ID#.	Amount of contribution (\$)
Zaio	out-or-state PAC	C (ID#:)	Amount of contribution (\$)
	Contributor address; City; State	; Zip Code	
	Contributor address, City, State	e, Zip Gode	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

Th	ne Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2: 1 of 1
2 FILER NAME Mr Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$
5 Date 6 Full name of contributor out-of-state PAC (ID#:) Chad West 7 Contributor address; City; State; Zip Code 3606 S. Tyler St Dallas, TX 75224		8 Amount of Gontribution \$\ \text{description} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor	Amount of In-kind contribution \$. description	
			Check if travel outside of Texas. Complete Schedule T.
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDU	JLE AS NEEDED

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE F1

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 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)	
4 Date 01/22/2021	5 Payee name CCP		
6 Amount (\$) 50.00	7 Payee address; City; State; Zip Code 5534 S Hampton Rd Dallas, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 02/02/2021	Payee name CCP		
Amount (\$) 75.00	Payee address; City; State; Zip Code 5534 S Hampton Rd Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 01/14/2021	Payee name Office Depot		
Amount (\$) 143.44	Payee address; City; State; Zip Code 39718 LBJ Frwy Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

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 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 02/23/2021	5 Payee name Office Depot	·
6 Amount (\$) 44.37	7 Payee address; City; State; Zip Code 39718 LBJ Frwy Dallas, TX 75232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 02/06/2021	Payee name Office Depot	
Amount (\$) 98.05	Payee address; City; State; Zip Code 39718 LBJ Frwy Dallas, TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 02/08/2021	Payee name Office Depot	
Amount (\$) 143.00	Payee address; City; State; Zip Code 39718 LBJ Frwy Dallas, TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

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 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission F	Filers)
4 Date 03/09/2021	5 Payee name Office Depot	·	
6 Amount (\$) 34.50	7 Payee address; City; State; Zip Code 39718 LBJ Frwy Dallas, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 03/09/2021	Payee name Office Depot		
Amount (\$) 197.15	Payee address; City; State; Zip Code 39718 LBJ Frwy Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 03/21/2021	Payee name Boston Market		
Amount (\$) 21.91	Payee address; City; State; Zip Code 735 E Pleasant Run Rd Desoto, TX 75115		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED	

SCHEDULE F1

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	S/Wages/Contract Labor Other (enter a category not listed above)	
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 4 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)	
4 Date 01/12/2021	5 Payee name Baby Back Shack		
6 Amount (\$) 13.15	7 Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 01/27/2021	Payee name Baby Back Shack		
Amount (\$) 29.71	Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 02/03/2021	Payee name Baby Back Shack		
Amount (\$) 40.43	Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

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
Others (actions extensions thirted phone)

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 5 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 02/08/2021	5 Payee name Baby Back Shack	,
6 Amount (\$) 10.72	7 Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 02/26/2021	Payee name Baby Back Shack	
Amount (\$) 31.66	Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8
Date 03/12/2021	Payee name Baby Back Shack	
Amount (\$) 19.00	Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	care. (c. ter a category not noted above)
1 Total pages Schedule F1: 6 of 47	•		3 Filer ID (Ethics Commission Filers)
4 Date 01/06/2021	5 Payee name Burger King	I	
6 Amount (\$) 22.80	7 Payee address; City; State; Zip Code 2403 W Wheatland Rd Dallas, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/18/2021	Payee name Burger King		
Amount (\$) 15.54	Payee address; City; State; Zip Code 2403 W Wheatland Rd Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/18/2021	Payee name Cheddars		
Amount (\$) 31.68	Payee address; City; State; Zip Code 39640 LBJ Frwy Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

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 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/15/2021	5 Payee name Chilis	·
6 Amount (\$) 50.74	7 Payee address; City; State; Zip Code 2503 W Wheatland Rd Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description 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/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 03/16/2021	Payee name Chilis	
Amount (\$) 40.57	Payee address; City; State; Zip Code 2503 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8
Date 03/06/2021	Payee name Chipotle Mexican Grill	
Amount (\$) 26.25	Payee address; City; State; Zip Code 39779 LBJ Frwy Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

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 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/22/2021	5 Payee name Churchs		
6 Amount (\$) 18.67	7 Payee address; City; State; Zip Code 1025 W Camp Wisdom Dallas, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/22/2021	Payee name Churchs		
Amount (\$) 18.67	Payee address; City; State; Zip Code 1025 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/22/2021	Payee name Churchs		
Amount (\$) 18.67	Payee address; City; State; Zip Code 1025 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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 (onter a dategory not noted above)
1 Total pages Schedule F1: 9 of 47	•	·	3 Filer ID (Ethics Commission Filers)
4 Date 03/10/2021	5 Payee name Colters		
6 Amount (\$) 25.76	7 Payee address; City; State; Zip Code 3904 W Camp Wisdom Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/14/2021	Payee name Colters		
Amount (\$) 24.84	Payee address; City; State; Zip Code 3904 W Camp Wisdom Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/14/2021	Payee name Colters		
Amount (\$) 25.71	Payee address; City; State; Zip Code 3904 W Camp Wisdom Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

Other (enter a category not listed above)

Gredit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 10 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 01/20/2021	5 Payee name Cowboy Chicken	
6 Amount (\$) 52.46	7 Payee address; City; State; Zip Code 5315 Greenville Ave Dallas, TX 75206	
PURPOSE OF EXPENDITURE 9 Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense Candidate / Officeholder name	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food Office sought Office held
expenditure to benefit C/OF		Council District 8
Date 02/23/2021	Payee name Cowboy Chicken	
Amount (\$) 25.98	Payee address; City; State; Zip Code 5315 Greenville Ave Dallas, TX 75206	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8
Date 03/14/2021	Payee name Golden Chick	
Amount (\$) 9.44	Payee address; City; State; Zip Code 3789 W Camp Wisdom Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

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

Gredit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 11 of 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/20/2021	5 Payee name Halls Honey Fried Chicken		
6 Amount (\$) 20.09	7 Payee address; City; State; Zip Code 4105 W Camp Wisdom Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Check if Austin	utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 01/02/2021	Payee name KFC		
Amount (\$) 6.48	Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 01/30/2021	Payee name KFC		
Amount (\$) 9.72	Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

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 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 02/05/2021	5 Payee name La Madeline	·	
6 Amount (\$) 31.52	7 Payee address; City; State; Zip Code 6430 N Mac Arthur BlvdIrving, TX 75239		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/27/2021	Payee name Lisa Soul Food Cafe		
Amount (\$) 59.20	Payee address; City; State; Zip Code 2550 W Redbird Lane Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/27/2021	Payee name Lisa Soul Food Cafe		
Amount (\$) 56.27	Payee address; City; State; Zip Code 2550 W Redbird Lane Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 13 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/05/2021	5 Payee name Lisa Soul Food Cafe	
6 Amount (\$) 60.59	7 Payee address; City; State; Zip Code 2550 W Redbird Lane Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description 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/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 03/15/2021	Payee name Lisa Soul Food Cafe	
Amount (\$) 60.87	Payee address; City; State; Zip Code 2550 W Redbird Lane Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8
Date 03/22/2021	Payee name Lisa Soul Food Cafe	
Amount (\$) 30.30	Payee address; City; State; Zip Code 2550 W Redbird Lane Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	/Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 14 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/22/2021	5 Payee name Lubys Cafeteria	
6 Amount (\$) 34.82	7 Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description 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 Tennell Atkins	Office sought Office held Council District 8
Date 03/03/2021	Payee name Lubys Cafeteria	
Amount (\$) 40.24	Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232	_
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8
Date 03/11/2021	Payee name Lubys Cafeteria	
Amount (\$) 22.55	Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

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

Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 15 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/13/2021	5 Payee name Lubys Cafeteria	
6 Amount (\$) 25.51	7 Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 03/16/2021	Payee name Lubys Cafeteria	
Amount (\$) 12.55	Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8
Date 01/16/2021	Payee name McDonalds	
Amount (\$) 21.27	Payee address; City; State; Zip Code 125 W Camp Wisdom Dallas, TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 16 of 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/16/2021	5 Payee name McDonalds		
6 Amount (\$) 21.27	7 Payee address; City; State; Zip Code 125 W Camp Wisdom Dallas, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T.
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 01/16/2021	Payee name McDonalds		
Amount (\$) 21.27	Payee address; City; State; Zip Code 125 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/11/2021	Payee name McDonalds		
Amount (\$) 9.84	Payee address; City; State; Zip Code 125 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

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: 17 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)		
4 Date 02/22/2021	5 Payee name McDonalds			
6 Amount (\$) 16.84	7 Payee address; City; State; Zip Code 125 W Camp Wisdom Dallas, TX 75232			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description 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/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
Date 03/17/2021	Payee name McDonalds			
Amount (\$) 19.11	Payee address; City; State; Zip Code 125 W Camp Wisdom Dallas, TX 75232			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8		
Date 01/13/2021	Payee name Ojeda Family Rest.			
Amount (\$) 33.55	Payee address; City; State; Zip Code 2109 N Hampton Desoto, TX 75115			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8		
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

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: 18 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 02/25/2021	5 Payee name Ojeda Family Rest.	
6 Amount (\$) 45.74	7 Payee address; City; State; Zip Code 2109 N Hampton Desoto, TX 75115	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 02/20/2021	Payee name Outback	
Amount (\$) 56.25	Payee address; City; State; Zip Code 1101 N I-35 E Desoto, TX 75115	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8
Date 03/17/2021	Payee name Pizza Hut	
Amount (\$) 14.86	Payee address; City; State; Zip Code 1450 N Pleasant Run Rd Lancaster, TX 75146	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

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

Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 19 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 01/02/2021	5 Payee name Sams Club	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description 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 Tennell Atkins	Office sought Office held Council District 8
Date	Payee name	
01/31/2021	Sams Club	
Amount (\$) 194.69	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8
Date 02/06/2021	Payee name Sams Club	
Amount (\$) 185.63	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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.	Other (enter a category not listed above)
1 Total pages Schedule F1: 20 of 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 02/13/2021	5 Payee name Sams Club	1	
6 Amount (\$) 241.45	7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 01/15/2021	Payee name Saltgrass		
Amount (\$) 96.34	Payee address; City; State; Zip Code 747 N Hwy 67 Cedar Hill, TX 75104		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 01/15/2021	Payee name Saltgrass		
Amount (\$) 96.34	Payee address; City; State; Zip Code Cedar Hill, TX 75104		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED

SCHEDULE F1

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: 21 of 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/09/2021	5 Payee name South Dallas Cafe		
6 Amount (\$) 63.27	7 Payee address; City; State; Zip Code 7035 Marvin D Love Fwpallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/11/2021	Payee name South Dallas Cafe		
Amount (\$) 22.18	Payee address; City; State; Zip Code 7035 Marvin D Love Fwpallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/19/2021	Payee name South Dallas Cafe		
Amount (\$) 52.47	Payee address; City; State; Zip Code 7035 Marvin D Love Fwpallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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: 22 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)	
4 Date 01/09/2021	5 Payee name Soulmans BBQ		
6 Amount (\$) 63.27	7 Payee address; City; State; Zip Code 8018 S Lancaster Rd Dallas, TX 75241		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 01/11/2021	Payee name Soulmans BBQ		
Amount (\$) 19.20	Payee address; City; State; Zip Code 8018 S Lancaster Rd Dallas, TX 75241		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8	
Date 02/02/2021	Payee name Soulmans BBQ		
Amount (\$) 17.48	Payee address; City; State; Zip Code 8018 S Lancaster Rd Dallas, TX 75241		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 23 of 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/11/2021	5 Payee name Soulmans BBQ		
6 Amount (\$) 22.18	7 Payee address; City; State; Zip Code 8018 S Lancaster Rd Dallas, TX 75241		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/11/2021	Payee name Soulmans BBQ		
Amount (\$) 22.18	Payee address; City; State; Zip Code 8018 S Lancaster Rd Dallas, TX 75241		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/15/2021	Payee name Soulmans BBQ		
Amount (\$) 18.34	Payee address; City; State; Zip Code 8018 S Lancaster Rd Dallas, TX 75241		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

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 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/19/2021	5 Payee name Soulmans BBQ		
6 Amount (\$) 52.47	7 Payee address; City; State; Zip Code 8018 S Lancaster Rd Dallas, TX 75241		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T.
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/13/2021	Payee name Taco Casa		
Amount (\$) 22.23	Payee address; City; State; Zip Code 8155 R L Thornton FrwyDallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 01/16/2021	Payee name Wendys		
Amount (\$) 19.76	Payee address; City; State; Zip Code 2828 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED

SCHEDULE F1

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.	Other (efficie a category not listed above)
1 Total pages Schedule F1: 25 of 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/16/2021	5 Payee name Wendys		
6 Amount (\$) 26.36	7 Payee address; City; State; Zip Code 2828 W Wheatland Rd Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/19/2021	Payee name Wendys		
Amount (\$) 22.15	Payee address; City; State; Zip Code 2828 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought	Office held
Date 01/06/2021	Payee name Walmart		
Amount (\$) 196.44	Payee address; City; State; Zip Code 150 N I-35 E Lancaster, TX 75146		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED

SCHEDULE F1

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 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/18/2021	5 Payee name Texaco	·
6 Amount (\$) 38.61	7 Payee address; City; State; Zip Code 5909 S Hampton Rd Dallas, TX 75232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description 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/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 01/01/2021	Payee name Sams Club	
Amount (\$) 29.50	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fuel
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 01/14/2021	Payee name Sams Club	
Amount (\$) 28.51	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fuel
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

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

Gredit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 27 of 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/02/2021	5 Payee name Sams Club		
6 Amount (\$) 22.45	7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Check if Austin	utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 01/31/2021	Payee name Sams Club		
Amount (\$) 29.01	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		utside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/20/2021	Payee name Sams Club		
Amount (\$) 40.72	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 28 of 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/01/2021	5 Payee name Sams Club		
6 Amount (\$) 35.72	7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/12/2021	Payee name Sams Club		
Amount (\$) 36.45	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/16/2021	Payee name Sams Club		
Amount (\$) 17.10	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

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

Gredit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 29 of 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 02/23/2021	5 Payee name Sams Club		
6 Amount (\$) 36.06	7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense Candidate / Officeholder name		utside of Texas. Complete Schedule T. n, TX, officeholder living expense Office held
9 Complete ONLY if direct expenditure to benefit C/OF		Council District 8	Office field
Date 03/01/2021	Payee name Sams Club		
Amount (\$) 43.59	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		utside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/01/2021	Payee name Sams Club		
Amount (\$) 31.92	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

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

Gredit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 30 of 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/01/2021	5 Payee name Sams Club		
6 Amount (\$) 40.17	7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense Candidate / Officeholder name		utside of Texas. Complete Schedule T. n, TX, officeholder living expense Office held
9 Complete ONLY if direct expenditure to benefit C/OF		Council District 8	Office field
Date 03/09/2021	Payee name Sams Club		
Amount (\$) 42.71	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		utside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/16/2021	Payee name Sams Club		
Amount (\$) 37.19	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

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: 31 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/11/2021	5 Payee name USPS	
6 Amount (\$) 146.00	7 Payee address; City; State; Zip Code 55213 S Hampton Rd Dallas, TX 75232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense postage
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 02/01/2021	Payee name Extra Space Storage	
Amount (\$) 261.00	Payee address; City; State; Zip Code 39050 LBJ Frwy Dallas, TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 01/01/2021	Payee name Extra Space Storage	
Amount (\$) 261.00	Payee address; City; State; Zip Code 39050 LBJ Frwy Dallas, TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage rental
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF TH	S SCHEDULE AS NEEDED

SCHEDULE F1

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.	
1 Total pages Schedule F1: 32 of 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/12/2021	5 Payee name Home Depot		
6 Amount (\$) 60.56	7 Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/12/2021	Payee name Office Depot		
Amount (\$) 17.26	Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/13/2021	Payee name Home Depot		
Amount (\$) 137.91	Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		iside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED

SCHEDULE F1

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: 33 of 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/13/2021	5 Payee name Home Depot		
6 Amount (\$) 76.20	7 Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		ntside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/16/2021	Payee name Home Depot		
Amount (\$) 74.56	Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/22/2021	Payee name Home Depot		
Amount (\$) 229.70	Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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.	
1 Total pages Schedule F1: 34 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers))
4 Date 03/22/2021	5 Payee name Home Depot		
6 Amount (\$) 229.70	7 Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 03/06/2021	Payee name Home Depot		
Amount (\$) 179.97	Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 03/15/2021	Payee name MMS Company Ad Specialties, LLC		
Amount (\$) 1995.00	Payee address; City; State; Zip Code 217 N I-35 E Desoto, TX 75115		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Yard Signs	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED	

SCHEDULE F1

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 (office a dataget) not not dead above)
1 Total pages Schedule F1: 35 of 47	•		3 Filer ID (Ethics Commission Filers)
4 Date 03/15/2021	5 Payee name MMS Company Ad Specialties, LLC		
6 Amount (\$) 1027.75	7 Payee address; City; State; Zip Code 217 N I-35 E Desoto, TX 75115		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 01/01/2021	Payee name Reilly Echols Printing, Inc		
Amount (\$) 1839.17	Payee address; City; State; Zip Code 1710 S Harwood Dallas, TX 75215		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 01/02/2021	Payee name M & M Advertising		
Amount (\$) 1800.00	Payee address; City; State; Zip Code P.O. Box 1418 Desoto, TX 75115		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

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.	
1 Total pages Schedule F1: 36 of 47	2 FILER NAME Mr Tennell Atkins	3	3 Filer ID (Ethics Commission Filers)
4 Date 01/05/2021	5 Payee name Master-Mark Advertising Agency	·	
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code P.O. Box 1341 Desoto, TX 75115		
PURPOSE OF EXPENDITURE 9 Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name	Check if Austin, 1 Paper posters Office sought	de of Texas. Complete Schedule T. [X, officeholder living expense Office held
expenditure to benefit C/OF	Tennell Atkins	Council District 8	
Date 02/13/2021	Payee name CCP		
Amount (\$) 19.08	Payee address; City; State; Zip Code 5534 S Hampton Rd Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		de of Texas. Complete Schedule T. X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/18/2021	Payee name CCP		
Amount (\$) 40.00	Payee address; City; State; Zip Code 5534 S Hampton Rd Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		de of Texas. Complete Schedule T. IX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEED	DED

SCHEDULE F1

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: 37 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 02/01/2021	5 Payee name CCP	
6 Amount (\$) 75.00	7 Payee address; City; State; Zip Code 5534 S Hampton Rd Dallas, TX 75232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense printing
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 01/15/2021	Payee name Tajuan Brewster	
Amount (\$) 80.00	Payee address; City; State; Zip Code 716 Paula Court Mesquite, TX 75149	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense employee pay
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 01/25/2021	Payee name Tajuan Brewster	
Amount (\$) 80.00	Payee address; City; State; Zip Code 716 Paula Court Mesquite, TX 75149	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense employee pay
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

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 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)	
4 Date 01/15/2021	5 Payee name Lakisha Gaudy		
6 Amount (\$) 80.00	7 Payee address; City; State; Zip Code 716 Paula Court Mesquite, TX 75149		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense employee pay	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 01/25/2021	Payee name Lakisha Gaudy		
Amount (\$) 80.00	Payee address; City; State; Zip Code 716 Paula Court Mesquite, TX 75149		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense employee pay	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 01/15/2021	Payee name Gail Turner		
Amount (\$) 290.00	Payee address; City; State; Zip Code 524 Sumac Place DeSoto, TX 75115		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense employee pay	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED	

SCHEDULE F1

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: 39 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 01/25/2021	5 Payee name Gail Turner	'
6 Amount (\$) 210.00	7 Payee address; City; State; Zip Code 524 Sumac Place DeSoto, TX 75115	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense employee pay
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date	Payee name	
01/30/2021	Gai Turner	
Amount (\$) 185.00	Payee address; City; State; Zip Code 524 Sumac Place Desoto, TX 75115	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense employee pay
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 02/09/2021	Payee name Cheryle Washington	
Amount (\$) 200.00	Payee address; City; State; Zip Code 2310 N Henderson Ave Dallas, TX 75206	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense employee pay
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

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

Orean Gara Fayment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 40 of 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/25/2021	5 Payee name Cheryle Washington		
6 Amount (\$) 360.00	7 Payee address; City; State; Zip Code 2310 N Henderson Ave Dallas, TX 75206		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/25/2021	Payee name Cheryle Washington		
Amount (\$) 170.00	Payee address; City; State; Zip Code 2310 N Henderson Ave Dallas, TX 75206		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 01/25/2021	Payee name Lucy Cain		
Amount (\$) 250.00	Payee address; City; State; Zip Code 4312 Spring St Dallas, TX 75241		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

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: 41 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)	
4 Date 02/05/2021	5 Payee name Lucy Cain		
6 Amount (\$) 240.00	7 Payee address; City; State; Zip Code 4312 Spring St Dallas, TX 75241		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense employee pay	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 03/09/2021	Payee name Lucy Cain		
Amount (\$) 280.00	Payee address; City; State; Zip Code 4312 Spring St Dallas, TX 75241		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense employee pay	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 01/25/2021	Payee name Elite News		
Amount (\$) 1000.00	Payee address; City; State; Zip Code 4347 S Hampton Rd Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense advertising	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

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: 42 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)	
4 Date 02/08/2021	5 Payee name Zach Ballard	,	
6 Amount (\$) 320.00	7 Payee address; City; State; Zip Code 4201 Bunker Hill Garland, TX 75042		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense consulting	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 01/08/2021	Payee name Zach Ballard		
Amount (\$) 750.00	Payee address; City; State; Zip Code 4201 Bunker Hill Garland, TX 75042		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense consulting	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 02/13/2021	Payee name Texas Democratic Party		
Amount (\$) 550.00	Payee address; City; State; Zip Code 1106 Lavaca Suite 100 Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Voter Account Phone List	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

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 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)	
4 Date 03/10/2021	5 Payee name Democracy Toolbox		
6 Amount (\$) 2000.00	7 Payee address; City; State; Zip Code 8552 Royal County Dow MDKinn ey, TX 75070		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense consulting	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 01/02/2021	Payee name Big Bang Endeavors		
Amount (\$) 600.00	Payee address; City; State; Zip Code 103 NW 14th St Grand Prairie, TX 75050		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Push card	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 02/03/2021	Payee name Big Bang Endeavors		
Amount (\$) 340.99	Payee address; City; State; Zip Code 103 NW 14th St Grand Prairie, TX 75050		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED	

SCHEDULE F1

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 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/01/2021	5 Payee name The Order Desk		
6 Amount (\$) 691.59	7 Payee address; City; State; Zip Code 9840 Monroe Dr Suite 1 (☐ allas, TX 75220		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 01/01/2021	Payee name Phone Burner		
Amount (\$) 596.00	Payee address; City; State; Zip Code 1968 S Coast Hwy Suite L806 an Beach, CA 92651		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/07/2021	Payee name Phone Burner		
Amount (\$) 298.00	Payee address; City; State; Zip Code 1968 S Coast Hwy Suite L8q0 an Beach, CA 92651		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)	
4 Date 03/07/2021	5 Payee name Phone Burner		
6 Amount (\$) 298.00	7 Payee address; City; State; Zip Code 19638 S Coast Hwy Suit La់ខ្លាំ Beach, CA 92651		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense phone	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 01/09/2021	Payee name ATT		
Amount (\$) 369.00	Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8	
Date 02/21/2021	Payee name ATT		
Amount (\$) 411.00	Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED	

SCHEDULE F1

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: 46 of 47	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/09/2021	5 Payee name ATT	·
6 Amount (\$) 360.00	7 Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description 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/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 01/01/2021	Payee name Jefferson Monument	
Amount (\$) 350.00	Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 02/01/2021	Payee name Jefferson Monument	
Amount (\$) 350.00	Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

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 complete this form.			
1 Total pages Schedule F1: 47 of 47	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/01/2021	5 Payee name Jefferson Monument		
6 Amount (\$) 350.00	7 Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		utside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		utside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED