CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	Filer ID (Ethics Comm	nission Filers)		2 Total pages filed: 41	OFFICE	USE ONLY
3	CANDIDATE / OFFICEHOLDER NAME		Tennell			
4	ORIGINAL REPORT TYPE	January 15 X July 15 30th day before election 8th day before election	15th app	Other (specify) reded \$500 limit day after treasurer ointment (officeholder only)	Date Hand-delivered o	r Date Postmarked Amount \$
5	ORIGINAL PERIOD COVERED	Month Day Year 04 / 21 / 2021	ТН	Month Day Year ROUGH 06 30 2021	Date Processed Date Imaged	
6	6 EXPLANATION OF CORRECTION Correction to Last Day Balance (Line 5, Coversheet 2)-\$20,267.05					
7	I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check ONLY if applicable:					
	Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.					
* * * Electronically Certified * * *						
	AFFIX NOTARY STAI	MP / SEAL ABOVE		Signature of Candidate or	Officeholder	
	Sworn to and subscribe	ed before me, by the saidTennell A	tkin:	s, this the	9th day of May	,
		which, witness my hand and seal of				
-	Signature of officer add	ministering oath Pri	nted	name of officer administering oath	Title of officer	administering oath
	Re	member To Attach Any I		t Of The Campaign Finance R	eport Form	

Needed To Report And Explain Corrections

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 41
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST Tennell	MI	OFFICE USE ONLY
NAME	NICKNAME LAST	SUFFIX	Date Received
	Atkins		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS		CITY; STATE; ZIP CODE Dallas TX 75232	
Change of Address			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (469) 417 8839	EXTENSION	Date Hand-delivered or Date Postmarked Receipt # Amount \$
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST Velma	MI	Date Processed
NAME	NICKNAME LAST	SUFFIX	Date Processed
	Milliner		Date Imaged
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SU	JITE #; CITY;	STATE; ZIP CODE
TREASURER ADDRESS (Residence or Business)	1407 Laura Lane	Dallas TX 75241	
,	AREA CODE PHONE NUMBER	EXTENSION	
8 CAMPAIGN TREASURER PHONE	(214) 371 7482	EXTENSION	
9 REPORT TYPE	January 15 30th day before el	lection Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	X July 15 8th day before elec	ction Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)
10 PERIOD	Month Day Year	Month	Day Year
COVERED	04 / 21 /2021	THROUGH 06	30 / 2021
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year Primary	Runoff Other Description	
	X General	Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known Council District 8)
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS AT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED.	MAY HAVE BEEN MADE WITHOUT THE CAND	DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR
COMMITTEE(3)	COMMITTEE TYPE COMMITTEE NAME		
Additional Pages	GENERAL COMMITTEE ADDRESS		
	SPECIFIC COMMITTEE CAMPAIGN TREA	ASURER NAME	
	COMMITTEE CAMPAIGN TRE	EASURER ADDRESS	
	GO TO	DAGE 2	
	90 10	FAGE 4	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Tennell Atkins				16 Filer	ID (Ethics Co	mmission Filers)
17 CONTRIBUTION TOTALS	PLEDGE		L CONTRIBUTIONS (OTHER T NTEES OF LOANS, OR TRONICALLY)	THAN	\$ 0.00	
		POLITICAL CONTRIE THAN PLEDGES, LOAN	BUTIONS IS, OR GUARANTEES OF LO	ANS)	\$ 32675.	00
EXPENDITURE TOTALS	3. TOTAL U	INITEMIZED POLITICAI	_ EXPENDITURE.		\$ 0.00	
	4. TOTAL	POLITICAL EXPENDI	TURES		\$ 35366.	91
CONTRIBUTION BALANCE		OLITICAL CONTRIBUT	IONS MAINTAINED AS OF THE	E LAST DAY	\$ 20267.	05
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF Y OF THE REPORTING	ALL OUTSTANDING LOANS A	AS OF THE	\$ 0.00	
		er penalty of perjury, th	at the accompanying report i	s true and cor	rrect and inclu	des all information
			***ELECTRON	ICALLY CE	ERTIFIED**	*
			Signature of	of Candidate o	or Officeholde	r
		Diagon compl	ata aithar antian ha	Jour		
		Please compl	ete either option be	elow:		
(1) Affidavit						
(1) Amuavit						
NOTARY STAMP/SEA	-					
Sworn to and subscribed	before me by	Tennell Atkins	this	the 19th	dav of	May .
	which, witness my ha				- ,	,
20, to certify	willon, withess my na	nd and sear of office.				
Signature of officer administe	ring oath	Printed name of office	cer administering oath		Title of officer	administering oath
			OR			
(2) Unsworn Declaration	on		·-·			
(2) Onsworn Beelaran	J11					
My name is			, and my date of bir	rth is		·
My address is				_,,		
	(stre	et)	(city)	(state)	,	. ,
Executed in	County, St	tate of	_ , on the day of (r	month)	, 20 (year)	
			Signature of C	andidate/Office	eholder (Decla	arant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	19 FILER NAME Tennell Atkins 20 Filer ID (Ethics Com					
21	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE					
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS				
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTION	DNS	\$ 0.00			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00			
4.	SCHEDULE E: LOANS		\$ 0.00			
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL	AL CONTRIBUTIONS	\$ 35,366.91			
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00			
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLIT	\$ 0.00				
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00			
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONA	L FUNDS	\$ 0.00			
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS	TO A BUSINESS OF C/OH	\$ 0.00			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITIC	AL CONTRIBUTIONS	\$ 0.00			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONT TO FILER	RIBUTIONS RETURNED	\$ 0.00			

SCHEDULE A1

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

The	Instruction Guide explains how to com	plete this form.	1 Total pages Schedule A1: 1 of 13
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-	of-state PAC (ID#:)	7 Amount of contribution (\$)
04/21/2021	M Kevin Bryant		150.00
	6 Contributor address; Cit 4463 Brookview Drive	ty; State; Zip Code Dallas, TX 75220	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor out-	of-state PAC (ID#:)	Amount of contribution (\$)
04/21/2021	Stonewall Democrats of Dallas		250.00
	Contributor address; Cit P.O. Box 192305	ty; State; Zip Code Dallas, TX 75219	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	of-state PAC (ID#:)	Amount of contribution (\$)
04/21/2021	Daniel H Crow		1000.00
	Contributor address; Cit 3526 Arrowhead Drive	ty; State; Zip Code Dallas, TX 75204	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)
Date 04/21/2021	Full name of contributor out-	of-state PAC (ID#:)	Amount of contribution (\$) 1000.00
	Contributor address; Cit 4700 Preston Road	y; Dallas, TX 75205	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

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

Th	e Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 2 of 13
2 FILER NAMI Tennell Atkins	E			3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2021				7 Amount of contribution (\$) 1000.00
	6 Contributor address; 6310 Mercedes Ave	City; Dallas,	State; Zip Code TX 75214	
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date 04/21/2021	Full name of contributor Kenneth J Valach	out-of-state PAC	(ID#:)	Amount of contribution (\$) 500.00
	Contributor address; 5 Lazee Trail	City; Housto	State; Zip Code on, TX 77024-5006	
Principal occi	upation / Job title (See Instructions)		Employer (See Instruct	cions)
Date 04/21/2021	Full name of contributor Robert N Crow	_	C (ID#:)	Amount of contribution (\$) 1000.00
	Contributor address; 4612 Watauga Road	City;	State; Zip Code TX 75209-1922	
Principal occ	upation / Job title (See Instructions)		Employer (See Instruct	tions)
Date 04/21/2021	Full name of contributor Shirley W Crow	out-of-state PAC	G (ID#:)	Amount of contribution (\$) 1000.00
	Contributor address; 6310 Mercedes Ave	City; Dallas,	State: Zip Code TX 75214	
Principal occ	upation / Job title (See Instructions)		Employer (See Instruct	tions)

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SCHEDULE A1

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

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 3 of 13
2 FILER NAME Tennell Atkins				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
04/21/2021	Eric Johnson Campaign			1000.00
	6 Contributor address; P.O. Box 192316	City;	State; Zip Code TX 75219	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	; (ID#:)	Amount of contribution (\$)
04/21/2021	Maleigh Carradine			500.00
	Contributor address; 9109 Oak Knoll Lane	City;	State; Zip Code on, TX 77078-4011	
Principal occup	 pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	; (ID#:)	Amount of contribution (\$)
04/21/2021	Kish M Kuehnert			500.00
	Contributor address; 3102 Glen Dale Drive	City; Colley	State; Zip Code ville , TX 76034	
Principal occup	 pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 04/21/2021	Full name of contributor Jack H Parker	out-of-state PAC	C (ID#:)	Amount of contribution (\$) 500.00
	Contributor address; 12824 Midway Road Suite	1139 City; Dallas,	State: Zip Code TX 75244	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	ions)

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SCHEDULE A1

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

The	Instruction Guide explains how to comple	ete this form.	1 Total pages Schedule A1: 4 of 13
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-s	state PAC (ID#:)	7 Amount of contribution (\$)
04/21/2021	J Christopher Luna		500.00
	6 Contributor address; City; P.O. Box 11523	State; Zip Code Dallas, TX 75313	
8 Principal occ	 upation / Job title (See Instructions)	9 Employer (See Instruc	ctions)
Date	Full name of contributor	state PAC (ID#:)	Amount of contribution (\$)
04/21/2021	CWA COPE PCC		750.00
	Contributor address; City;	State; Zip Code Washington, DC 20001	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)
Date	Full name of contributor	state PAC (ID#:)	Amount of contribution (\$)
05/18/2021	Bridget M Lopez		500.00
	Contributor address; City; 6258 Velasco Ave	State; Zip Code Dallas, TX 75214-3340	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	ctions)
Date 04/21/2021	Full name of contributor	state PAC (ID#:)	Amount of contribution (\$) 500.00
	Contributor address; City; 1830 Park Row Ave	Dallas, TX 75215-2751	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)

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SCHEDULE A1

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

The	Instruction Guide explains how to complete	e this form.	1 Total pages Schedule A1: 5 of 13
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-st	ate PAC (ID#:)	7 Amount of contribution (\$)
04/21/2021	Bradford A Phillips		1000.00
	6 Contributor address; City; 5515 Lobello Drive	State; Zip Code Pallas, TX 75229-5520	
8 Principal occi	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor	ate PAC (ID#:)	Amount of contribution (\$)
04/21/2021	Timothy Pannell		1000.00
	Contributor address; City;	State; Zip Code Dallas, TX 75227-4029	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	ctions)
Date	Full name of contributor out-of-st	ate PAC (ID#:)	Amount of contribution (\$)
04/21/2021	Itzel G Crow		1000.00
	Contributor address; City; 4612 Watauga Road I	State; Zip Code Dallas, TX 75209-1922	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)
Date 04/21/2021	Full name of contributor out-of-st Dallas Retired Firefighters Assoc PAC	ate PAC (ID#:)	Amount of contribution (\$) 1000.00
	Contributor address; City; P.O. Box 117540	State: Zip Code Carrollton, TX 75011	
Principal occu	 pation / Job title (See Instructions)	Employer (See Instruc	ctions)

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SCHEDULE A1

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

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 6 of 13
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (SOUTHWEST AIRLINES CO FREEDOM F	ID#:)	7 Amount of contribution (\$)
04/21/2021	SOUTHWEST AIRLINES COFREEDOM F		1000.00
	6 Contributor address; City; P.O. Box 36611 Dallas, 7	State; Zip Code ΓΧ 75235	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor uut-of-state PAC (ID#:)	Amount of contribution (\$)
04/29/2021	Joe Rust		1000.00
	Contributor address; City; 440 Gingerbread Lane Waxaha	State; Zip Code chie, TX 75165	
Principal occup	vation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor uut-of-state PAC (ID#:)	Amount of contribution (\$)
04/21/2021	Linebarger Goggan Blaire & Sampon		1000.00
	Contributor address; City; P.O. Box 17428 Austin,	State; Zip Code TX 78760	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 04/21/2021	Full name of contributor	ID#:)	Amount of contribution (\$) 500.00
	Contributor address; City; 2229 Possum Fire Trail Wylie, 7	State: Zip Code TX 75098-1549	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

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

	The Instruction Guide explains how to complete thi	s form.	1 Total pages Schedule A1: 7 of 13
2 FILER NA			3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2021	Angela Hale 6 Contributor address; City;	State; Zip Code	7 Amount of contribution (\$) 750.00
8 Principal	occupation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date 04/21/2021	Ron Barnhill Contributor address; City;	State; Zip Code er Mound, TX 75028-4664	Amount of contribution (\$) 750.00
Principal o	occupation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 04/21/2021	Michael Levy	State; Zip Code	Amount of contribution (\$) 150.00
Principal o	occupation / Job title (See Instructions)	Employer (See Instruct	tions)
Date 05/03/2021	Louis E Okon	C (ID#:) State: Zip Code 5, TX 75230-3128	Amount of contribution (\$) 1000.00
Principal o	Dallas Doccupation / Job title (See Instructions)	Employer (See Instruct	tions)

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SCHEDULE A1

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

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 8 of 13
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
04/21/2021	Jerry L Christian		100.00
	6 Contributor address; City;	State; Zip Code	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ons)
Date	_	(ID#:)	Amount of contribution (\$)
04/21/2021	Marguerite Steed Hoffman		1000.00
	Contributor address; City; 9963 Rockbrook Dr Dallas,	State; Zip Code FX 75220	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
04/21/2021	Mike A Myers		1000.00
	Contributor address; City;	State; Zip Code ΓX 75209	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 04/21/2021	Full name of contributor	(ID#:)	Amount of contribution (\$) 500.00
	Contributor address; City; P.O. Box 224725 Dallas, 7	State; Zip Code TX 75222	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

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

Th	ne Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 9 of 13
2 FILER NAM Tennell Atkins	E	3 Filer ID (Ethics Commission Filers)
4 Date 06/16/2021	Full name of contributor	7 Amount of contribution (\$) 1000.00
	6 Contributor address; City; State; Zip Code 3445 University Dallas, TX 75205	
8 Principal occ	cupation / Job title (See Instructions) 9 Employer (See Instructions)	ructions)
Date 06/08/2021	Full name of contributor	Amount of contribution (\$)
	Contributor address; City; State; Zip Code 4645 N Central Expressway Suite 20@Dallas, TX 75205	
Principal occ	upation / Job title (See Instructions) Employer (See Instr	uctions)
Date 06/08/2021	Full name of contributor	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code 1001 Belleview St Dallas, TX 75215-1811	
Principal occ	upation / Job title (See Instructions) Employer (See Instructions)	ructions)
Date 06/14/2021	Full name of contributor	Amount of contribution (\$) 250.00
	Contributor address; City; State; Zip Code 731 S R L Thornton Frwy Dallas, TX 75203	
Principal occ	supation / Job title (See Instructions) Employer (See Instr	ructions)

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SCHEDULE A1

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

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 10 of 13
2 FILER NAME Tennell Atkins				3 Filer ID (Ethics Commission Filers)
4 Date 06/10/2021	Full name of contributor Sam Coats Contributor address; 26 Ryddington Place	City;	State; Zip Code TX 75230	7 Amount of contribution (\$) 250.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Date 06/08/2021	Full name of contributor Michael Rader Contributor address; P.O. Box 249	City;	State; Zip Code ville, TX 76034	Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 05/15/2021	Full name of contributor Steven A Okon Contributor address; 5844 Preston Haven Dr		State; Zip Code TX 75230-2950	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 06/18/2021	Full name of contributor Vanessa A Hill	out-of-state PAC	: (ID#:)	Amount of contribution (\$) 1000.00
	Contributor address; P.O. Box 171424	City; Dallas,	State: Zip Code TX 75217	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

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

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 11 of 13
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 06/18/2021	Rafiqul Islam 6 Contributor address; City;	State; Zip Code ne, TX 76061	7 Amount of contribution (\$) 500.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date 06/16/2021	John S Chong Contributor address; City;	State; Zip Code, TX 75019	Amount of contribution (\$) 500.00
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 06/14/2021	H Giddings	State; Zip Code	Amount of contribution (\$) 500.00
Principal occu _l	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 06/14/2021	Full name of contributor	State: Zip Code	Amount of contribution (\$) 500.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

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

The	Instruction Guide explains how to co	omplete this	form.	1 Total pages Schedule A1: 12 of 13
2 FILER NAME Tennell Atkins				3 Filer ID (Ethics Commission Filers)
4 Date 06/18/2021	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$) 25.00
00/10/2021		City; Dallas,	State; Zip Code TX 75208	20.00
8 Principal occ	 upation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Date		out-of-state PAC	C (ID#:)	Amount of contribution (\$)
06/16/2021	Contributor address; 3445 University	City;	State; Zip Code TX 75205	750.00
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 06/22/2021	William Ming Tzong	out-of-state PAC	State; Zip Code	Amount of contribution (\$) 250.00
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 06/22/2021	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$) 250.00
	Contributor address: 6724 Verde Suite 329C	City; Irving,	State: Zip Code TX 75039-3415	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)

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SCHEDULE A1

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

The	Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1: 13 of 13
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 06/22/2021	Vg Brook	te PAC (ID#:)	7 Amount of contribution (\$) 250.00
	6 Contributor address; City; P.O. Box 140092 Ire	State; Zip Code ving, TX 75014-0092	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	ctions)
Date	Full name of contributor out-of-state	te PAC (ID#:)	Amount of contribution (\$)
06/18/2021	Kevin E Cho		250.00
	Contributor address; City; 1508 Summerside Dr Al	State; Zip Code Ilen, TX 75002	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	ctions)
Date	Full name of contributor	te PAC (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	ctions)
Date	Full name of contributor	te PAC (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)
	ATTACH ADDITIONAL COP	IES OF THIS SCHEDULE AS N	NEEDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 1 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 04/21/2021	5 Payee name Office Depot			
6 Amount (\$) 84.37	7 Payee address; 39759 LBJ Frwy Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description office supplies		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/23/2021	Office Depot			
Amount (\$) 36.22	Payee address; 39759 LBJ Frwy Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	office supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 05/03/2021	Payee name Cash Saver			
Amount (\$) 29.97	Payee address; 1201 W Camp Wisdom Dallas, TX 75232	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 2 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date 05/03/2021	5 Payee name Cash Saver			
6 Amount (\$) 95.96	7 Payee address; 1201 W Camp Wisdom Dallas, TX 75232	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description supplies		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	(Office held
Date	Payee name			
05/01/2021	Jefferson Monument			
Amount (\$) 350.00	Payee address; 1350 Manufacturing St Dallas, TX 75207	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Rent		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	(Office held
Date 06/01/2021	Payee name Jefferson Monument			
Amount (\$) 350.00	Payee address; 1350 Manufacturing St Dallas, TX 75207	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (errier a sategory rier	notou abovo,
1 Total pages Schedule F1: 3 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Com	nmission Filers)
4 Date 05/03/2021	5 Payee name Home Depot			
6 Amount (\$) 77.76	7 Payee address; 2901 W Wheatland Rd Dallas, TX 75237	City;	State; Z	ip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description supplies		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living exper	nse
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Offic	e held
Date 05/06/2021	Payee name ATT			
Amount (\$) 376.00	Payee address; P.O. Box 6811 Dallas, TX 75225	City;	State; Z	ip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description phone		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living exper	nse
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Offic	e held
Date 06/02/2021	Payee name ATT			
Amount (\$) 384.25	Payee address; P.O. Box 6811 Dallas, TX 75225	City;	State; Z	ip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description phone		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expen	se
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Offic	ce held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 4 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 06/17/2021	5 Payee name Elisha R Burrell			
6 Amount (\$) 100.00	7 Payee address; 6918 Sweet Sue Lane Dallas, TX 75241-3749	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description Gift		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
06/22/2021	Sheena Swehia			
Amount (\$) 300.00	Payee address; 14727 Sherlock r Addison, TX 75001	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Event Expense	Photographer		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 06/22/2021	Payee name Eddie Vinsac			
Amount (\$) 600.00	Payee address; 1900 Montauk Way Desoto, TX 75115-2736	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Band		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	, ,	,
1 Total pages Schedule F1: 5 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 04/22/2021	5 Payee name Sams Club			
6 Amount (\$) 32.90	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/26/2021	Payee name Sams Club			
Amount (\$) 32.10	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/26/2021	Payee name Sams Club			
Amount (\$) 16.20	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 6 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 04/26/2021	5 Payee name Sams Club			
6 Amount (\$) 34.97	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/26/2021	Payee name Sams Club			
Amount (\$) 41.90	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/29/2021	Payee name Sams Club			
Amount (\$) 44.92	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor 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: 7 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics C	Commission Filers)
4 Date 05/03/2021	5 Payee name Sams Club			
6 Amount (\$) 44.02	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living ex	pense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	0	ffice held
Date 05/04/2021	Payee name Sams Club			
Amount (\$) 47.28	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living ex	pense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought	0	ffice held
Date 05/10/2021	Payee name Sams Club			
Amount (\$) 33.60	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living ex	pense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	C	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 8 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date 06/01/2021	5 Payee name Sams Club			
6 Amount (\$) 48.66	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	(Office held
Date 06/01/2021	Payee name Sams Club			
Amount (\$) 23.30	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	C	Office held
Date 06/12/2021	Payee name Sams Club			
Amount (\$) 40.66	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living e	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor 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: 9 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 06/01/2021	5 Payee name Sams Club			
6 Amount (\$) 57.95	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 06/07/2021	Payee name Sams Club			
Amount (\$) 47.62	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 06/07/2021	Payee name Sams Club			
Amount (\$) 22.29	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	·

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 10 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 06/11/2021	5 Payee name Sams Club			
6 Amount (\$) 42.30	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 06/15/2021	Payee name Sams Club			
Amount (\$) 34.37	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 06/26/2021	Payee name Murphy USA 7674			
Amount (\$) 31.91	Payee address; 605 Uptown Blvd Cedar Hill, TX 75104	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 11 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 05/24/2021	5 Payee name Murphy USA 7674			
6 Amount (\$) 40.52	7 Payee address; 605 Uptown Blvd Cedar Hill, TX 75104	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, 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			
04/26/2021	Popeyes			
Amount (\$) 21.39	Payee address; 338 E Camp Wisdom RdDuncanville, TX 75116	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/28/2021	Payee name Burger King			
Amount (\$) 20.31	Payee address; 2403 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 12 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 05/03/2021	5 Payee name Taco Bell		
6 Amount (\$) 27.12	7 Payee address; 4345 W Camp Wisdom Dallas, TX 75237	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, 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		
05/03/2021	Wingstop		
Amount (\$) 40.46	Payee address; 3333 W Camp Wisdom Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 06/14/2021	Payee name Wingstop		
Amount (\$) 36.90	Payee address; 3333 W Camp Wisdom Dallas, TX 75237	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	oursi (orner a satogor	y
1 Total pages Schedule F1: 13 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date 05/03/2021	5 Payee name Williams Chicken			
6 Amount (\$) 115.97	7 Payee address; 6226 Marvin D Love Fw Pallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, 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 05/03/2021	Payee name Subway			
Amount (\$) 158.04	Payee address; 1111 W Camp Wisdom Dallas, TX 75232	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	(Office held
Date 05/06/2021	Payee name KFC			
Amount (\$) 14.17	Payee address; 3415 W Camp Wisdom Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 14 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Com	mission Filers)
4 Date 06/01/2021	5 Payee name KFC			
6 Amount (\$) 29.17	7 Payee address; 3415 W Camp Wisdom Dallas, TX 75237	City;	State; Zi _l	o Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expens	se
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office	e held
Date	Payee name			
05/10/2021	Two Ponders Restaurant			
Amount (\$) 38.37	Payee address; 1441 Robert B Cullum B Dral las, TX 75210	City;	State; Zi _l	o Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expens	se
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office	e held
Date 05/13/2021	Payee name South Dallas Cafe			
Amount (\$) 65.46	Payee address; 7035 Marvin D Love FwtDallas, TX 75237	City;	State; Zi _l	o Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expens	se
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Offic	e held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 15 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 05/24/2021	5 Payee name Campisis			
6 Amount (\$) 60.05	7 Payee address; 1520 Elms St Suite 111 Dallas, TX 75201	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g 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			
05/24/2021	Chilis			
Amount (\$) 71.91	Payee address; 2503 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 06/07/2021	Payee name JJ Fish & Chicken			
Amount (\$) 58.97	Payee address; 3302 W Camp Wisdom Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	·

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor 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 (effici a category	not listed above)
Total pages Schedule F1: 16 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics C	commission Filers)
4 Date 06/07/2021	5 Payee name JJ Fish & Chicken			
6 Amount (\$) 10.27	7 Payee address; 3302 W Camp Wisdom Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living ex	pense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	0	ffice held
Date 06/15/2021	Payee name Lisa Soul Food Cafe			
Amount (\$) 59.51	Payee address; 2550 W Redbird Lane Sulla HO4 TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living ex	pense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	O [,]	ffice held
Date 06/17/2021	Payee name Eddie Dean			
Amount (\$) 4112.96	Payee address; P.O. Box 1022 Terrell, TX 75160	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living ex	pense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor 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: 17 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 06/22/2021	5 Payee name Eddie Dean			
6 Amount (\$) 576.44	7 Payee address; P.O. Box 1022 Terrell, TX 75160	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
Date 06/23/2021	Payee name The Island Spot			
Amount (\$) 37.19	Payee address; 309 W Jefferson Dallas, TX 75208	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/21/2021	Payee name Gail Turner			
Amount (\$) 230.00	Payee address; 524 Sumac Place Desot, TX 75115	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 18 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 04/28/2021	5 Payee name Gail Turner			
6 Amount (\$) 300.00	7 Payee address; 524 Sumac Place Desot, TX 75115	City;	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
Date 05/01/2021	Payee name Gail Turner			
Amount (\$) 320.00	Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State; Zip Code	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date 04/22/2021	Payee name Cheryle Washington			
Amount (\$) 340.00	Payee address; 2310 N Henderson Ave Dallas, TX 75206	City;	State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 19 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commi	ssion Filers)
4 Date 05/18/2021	5 Payee name Cheryle Washington			
6 Amount (\$) 225.00	7 Payee address; 2310 N Henderson Ave Dallas, TX 75206	City;	State; Zip	Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
Date 05/01/2021	Payee name Anita Burnett			
Amount (\$) 620.00	Payee address; 8823 E Valley Ranch Suithevihité, TX 75063	City;	State; Zip	Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office h	neld
Date 05/01/2021	Payee name James Virden			
Amount (\$) 983.00	Payee address; 3425 Hacienda Dr Dallas, TX 75237	City;	State; Zip	Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office	held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 20 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 05/05/2021	5 Payee name James Virden		
6 Amount (\$) 250.00	7 Payee address; 3425 Hacienda Dr Dallas, TX 75237	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 05/12/2021	Payee name LaShun Virden		
Amount (\$) 983.00	Payee address; 3425 Hacienda Dr Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 05/05/2021	Payee name LaShun Virden		
Amount (\$) 250.00	Payee address; 3425 Hacienda Dr Dallas, TX 75237	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description labor	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 21 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 05/01/2021	5 Payee name Johnny M Green			
6 Amount (\$) 150.00	7 Payee address; 1518 Cumberland Dr Cedar Hill, TX 75104	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
06/22/2021	Idella Thomas			
Amount (\$) 100.00	Payee address; 3789 Cripple Creed Dr Dallas, TX 75224	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 05/01/2021	Payee name MSCAS, LLC			
Amount (\$) 660.00	Payee address; 217 N I-35 E Desoto, TX 75115	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Polling Expense	Description labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 22 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 05/01/2021	5 Payee name MSCAS, LLC			
6 Amount (\$) 3330.00	7 Payee address; 217 N I-35 E Desoto, TX 75115	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description labor		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
05/02/2021	MSCAS, LLC			
Amount (\$) 339.00	Payee address; 217 N I-35 E Desoto, TX 75115	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense	labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 05/05/2021	Payee name MSCAS, LLC			
Amount (\$) 194.00	Payee address; 217 N I-35 E Desoto, TX 75115	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 23 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 05/14/2021	5 Payee name MSCAS, LLC		
6 Amount (\$) 494.85	7 Payee address; 217 N I-35 E Desoto, TX 75115	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
05/01/2021	Extra Space Storage		
Amount (\$) 261.00	Payee address; 39050 LBJ Frwy Dallas, TX 75232	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Storage rental	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 06/01/2021	Payee name Extra Space Storage		
Amount (\$) 261.00	Payee address; 39050 LBJ Frwy Dallas, TX 75232	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Storage rental	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 24 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 05/01/2021	5 Payee name Phone Burner		
6 Amount (\$) 298.00	7 Payee address; 1968 S Coast Hwy Suite L800 uer Beach, CA 92651	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description phone	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
06/21/2021	Celebrate It! Balloons		
Amount (\$) 500.00	Payee address; 1608 Whitlock Lane Suite Trollton, TX 75006	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Event Expense	decorations	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 06/21/2021	Payee name Delightful Sweets		
Amount (\$) 221.40	Payee address; 324 E Beltline Road Suit D296 to, TX 75115	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Event Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 25 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 06/21/2021	5 Payee name TENNELL ATKINS		
6 Amount (\$) 15000.00	7 Payee address; 2717 MEADOW STONEDANAMETX 75232	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description loan re-payment	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name 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)	Description	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

City Secretary's Office

Supplemen Officeholde	ital Report ^r			FOR Cover She	et SR
1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Tennell	МІ	Total Pages Filed: 39	
	NICKNAME	LAST Atkins	SUFFIX	3. Office Held	
4. SUPPLEMENTAL REPORT TYPE	c January 15	c 30th day be	fore election c Runoff	c 15th day after camp treasurer appointme (officeholder only)	
	☆ July 15	c 8th day befo	ore election	500 c Final Report	
5. PERIOD / COVERED		4/21/20	021 THROUGH 6/30/202	21	
6. ELECTION	Month Day Year				
		c Prima	ry c Runoff	X General c Spe	ecial c N/A
7. OFFICE- HOLDER	CONTRIBUTION TOTALS	TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$0.00	
			OLDER CONTRIBUTIONS GES, LOANS, OR GUARANTEES	OF LOANS)	\$0.00
	EXPENDITURE	3. TOTAL OFFICEHO	OLDER EXPENDITURES OF \$100	O OR LESS, UNLESS ITEMIZED	\$0.00
	TOTALS	4. TOTAL OFFICEHO	OLDER EXPENDITURES		\$ 0.00
8. POLITICAL	CONTRIBUTION TOTALS		L CONTRIBUTIONS OF \$50 OR NTEES OF LOANS), UNLESS ITE	·	\$0.00
(Campaign)		6. TOTAL POLITICA (OTHER THAN PLEE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES	S OF LOANS)	\$ 32,675.00
	EXPENDITURE	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 0.00	
	TOTALS	8. TOTAL POLITICAL EXPENDITURES		\$35,366.91	
9. OFFICEHOLDER FU FOR CAMPAIGN PUR			AMOUNT OF OFFICEHOLDER CO		\$ 0.00
10. AFFIDAVIT		is true a		f perjury, that the accompai information required to be i	
4.F.W. NOTABY 0.T.	MD / 05 N ADOM		***ELECTRONICALL	Y CERTIFIED***	
AFFIX NOTARY STA	IMP / SEAL ABOVE		Signature of Candida	ate or Officeholder	
Sworn to and subscribed	before me, by the said	nell Atkins		, this the 19th	day
of May,	20_23, to certify which	n, witness my hand ar	nd seal of office.		
Signature of officer a	dministering oath	Printed name of office	er administering oath	Title of officer ad	ministering oath

SCHEDULE A1

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

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 1 of 13
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Tennell Atkins				
4 Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
04/21/2021	M Kevin Bryant			150.00
Campaign Contribution	6 Contributor address; 4463 Brookview Drive	City; Dallas,	State; Zip Code , TX 75220	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
04/21/2021	Stonewall Democrats of Da			250.00
Campaign Contribution	Contributor address; P.O. Box 192305	City;	State; Zip Code , TX 75219	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
04/21/2021	Daniel H Crow			1000.00
Campaign Contribution	Contributor address; 3526 Arrowhead Drive	City; Dallas,	State; Zip Code , TX 75204	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 04/21/2021	Full name of contributor Katherine R Crow	out-of-state PAC	C (ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; 4700 Preston Road	City; Dallas,	State: Zip Code TX 75205	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)

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SCHEDULE A1

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

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 2 of 13
2 FILER NAME Tennell Atkins				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
04/21/2021	Stuart M Crow			1000.00
Campaign Contribution	6 Contributor address; 6310 Mercedes Ave	City; Dallas,	State; Zip Code TX 75214	
8 Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
04/21/2021	Kenneth J Valach			500.00
Campaign Contribution	Contributor address; 5 Lazee Trail	City;	State; Zip Code on, TX 77024-5006	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
04/21/2021	Robert N Crow			1000.00
Campaign Contribution	Contributor address; 4612 Watauga Road	City; Dallas,	State; Zip Code TX 75209-1922	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date 04/21/2021	Full name of contributor Shirley W Crow	out-of-state PAC	: (ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; 6310 Mercedes Ave	City; Dallas,	State: Zip Code TX 75214	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)

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SCHEDULE A1

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

The	Instruction Guide explains how to c	complete this	form.	1 Total pages Schedule A1: 3 of 13
2 FILER NAME Tennell Atkins				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
04/21/2021	Eric Johnson Campaign			1000.00
Campaign Contribution	6 Contributor address; P.O. Box 192316	City; Dallas,	State; Zip Code TX 75219	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructi	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
04/21/2021	Maleigh Carradine			500.00
Campaign Contribution	Contributor address; 9109 Oak Knoll Lane	City;	State; Zip Code n, TX 77078-4011	
Principal occup	pation / Job title (See Instructions)		Employer (See Instructi	ons)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
04/21/2021	Kish M Kuehnert			500.00
Campaign Contribution	Contributor address; 3102 Glen Dale Drive	City; Colleyv	State; Zip Code ville, TX 76034	
Principal occu	pation / Job title (See Instructions)		Employer (See Instructi	ons)
Date 04/21/2021	Full name of contributor Jack H Parker	out-of-state PAC	(ID#:)	Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; 12824 Midway Road Suite 1139	Ocity; Dallas,	State: Zip Code TX 75244	
Principal occu	pation / Job title (See Instructions)		Employer (See Instructi	ions)

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SCHEDULE A1

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

The In 2 FILER NAME Tennell Atkins	struction Guide explains how to complet	e this form.	1 Total pages Schedule A1: 4 of 13
Termen Trucing			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor ☐ out-of-sta	ite PAC (ID#:)	7 Amount of contribution (\$)
04/21/2021	J Christopher Luna		500.00
Campaign Contribution	6 Contributor address; City; P.O. Box 11523	State; Zip Code vallas, TX 75313	
8 Principal occupa	ation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor	ite PAC (ID#:)	Amount of contribution (\$)
04/21/2021	CWA COPE PCC		750.00
Campaign Contribution	Contributor address; City; 501 3rd Street NW V	State; Zip Code Vashington, DC 20001	
Principal occupat	tion / Job title (See Instructions)	Employer (See Instruct	cions)
Date	Full name of contributor	ite PAC (ID#:)	Amount of contribution (\$)
05/18/2021	Bridget M Lopez		500.00
Campaign Contribution	Contributor address; City; 6258 Velasco Ave	State; Zip Code Pallas, TX 75214-3340	
Principal occupat	tion / Job title (See Instructions)	Employer (See Instruct	tions)
Date 04/21/2021	Full name of contributor out-of-sta Black Firefighters United PAC	ate PAC (ID#:)	Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; City; 1830 Park Row Ave	State: Zip Code vallas, TX 75215-2751	
Principal occupat	tion / Job title (See Instructions)	Employer (See Instruct	tions)

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SCHEDULE A1

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

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 5 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
04/21/2021	Bradford A Phillips		1000.00
Campaign Contribution	6 Contributor address; City; 5515 Lobello Drive Dallas,	State; Zip Code TX 75229-5520	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
04/21/2021	Timothy Pannell		1000.00
Campaign Contribution	Contributor address; City; 4361 Cedar Lake Drive Dallas,	State; Zip Code TX 75227-4029	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
04/21/2021	Itzel G Crow		1000.00
Campaign Contribution	Contributor address; City; 4612 Watauga Road Dallas, '	State; Zip Code TX 75209-1922	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 04/21/2021	Full name of contributor	(ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; City; P.O. Box 117540 Carrollt	State: Zip Code on, TX 75011	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

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

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 6 of 13
2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
04/21/2021	SOUTHWEST AIRLINES CO FREEDOM FUND	1000.00
Campaign Contribution	6 Contributor address; City; State; Zip P.O. Box 36611 Dallas, TX 75235	Code
8 Principal occu	pation / Job title (See Instructions) 9 Employer	(See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
04/29/2021	Joe Rust	1000.00
Campaign Contribution		o Code 165
Principal occup	pation / Job title (See Instructions) Employer	(See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
04/21/2021	Linebarger Goggan Blaire & Sampon	1000.00
Campaign Contribution	Contributor address; City; State; Zip P.O. Box 17428 Austin, TX 78760	Code
Principal occup	pation / Job title (See Instructions) Employer	(See Instructions)
Date 04/21/2021	Full name of contributor □ out-of-state PAC (ID#: Kimberly A Quirk	Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; City; State: Zip. 2229 Possum Fire Trail Wylie, TX 75098-154	Code 49
Principal occup	pation / Job title (See Instructions) Employer	(See Instructions)

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SCHEDULE A1

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

The	Instruction Guide explains how to con	mplete this	form.	1 Total pages Schedule A1: 7 of 13
2 FILER NAME Tennell Atkins				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor ou	it-of-state PAC	(ID#:)	7 Amount of contribution (\$)
04/21/2021	Angela Hale			750.00
Campaign Contribution	6 Contributor address; C 10902 Ormand Lane	Frisco,	State; Zip Code TX 75035	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructi	ions)
Date	Full name of contributor	it-of-state PAC	(ID#:)	Amount of contribution (\$)
04/21/2021	Ron Barnhill			750.00
Campaign Contribution		City;	State; Zip Code Mound, TX 75028-4664	
Principal occup	oation / Job title (See Instructions)		Employer (See Instructi	ons)
Date	Full name of contributor	it-of-state PAC	(ID#:)	Amount of contribution (\$)
04/21/2021	Michael Levy			150.00
Campaign Contribution	Contributor address; C 2920 Carlisle St Suite 1603	Dallas,	State; Zip Code TX 75204	
Principal occu	Dation / Job title (See Instructions)		Employer (See Instructi	ons)
Date 05/03/2021	Full name of contributor □ ou Louis E Okon	it-of-state PAC	(ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; C 7219 Kennedy Lane	ity; Dallas,	State: Zip Code TX 75230-3128	
Principal occu	Dation / Job title (See Instructions)		Employer (See Instruct	ons)

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SCHEDULE A1

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

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 8 of 13
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Tennell Atkins		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
04/21/2021	Jerry L Christian	100.00
Campaign Contribution	6 Contributor address; City; State; Zip Code 1440 Sunny Glen Drive Dallas, TX 75232	
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
04/21/2021	Marguerite Steed Hoffman	1000.00
Campaign Contribution	Contributor address; City; State; Zip Code 9963 Rockbrook Dr Dallas, TX 75220	
Principal occu	pation / Job title (See Instructions) Employer (See Instruc	tions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
04/21/2021	Mike A Myers	1000.00
Campaign Contribution	Contributor address; City; State; Zip Code 6310 Lemmon Ave Suite 200 Dallas, TX 75209	
Principal occu	pation / Job title (See Instructions) Employer (See Instruc	tions)
Date 04/21/2021	Full name of contributor out-of-state PAC (ID#:) John W Price	Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; City; State: Zip Code P.O. Box 224725 Dallas, TX 75222	
Principal occu	pation / Job title (See Instructions) Employer (See Instruc	tions)

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SCHEDULE A1

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

2 FILER NAME Tennell Atkins 4 Date 5 06/16/2021	_	PAC (ID#:)	3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$)
4 Date 5		PAC (ID#:)	7 Amount of contribution (C)
		PAC (ID#:)	7 Amount of contribution (\$)
06/16/2021	D 11 1 D 4		7 Amount of contribution (\$)
	Roselind E Aranza		1000.00
Campaign Contribution	Contributor address; City; 3445 University Dal	State; Zip Code llas, TX 75205	
8 Principal occupa	tion / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor	PAC (ID#:)	Amount of contribution (\$)
06/08/2021	Frank Mihalopoulos		1000.00
Campaign Contribution	Contributor address; City; 4645 N Central Expressway Suite 20@al	State; Zip Code	
Principal occupat	ion / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state	PAC (ID#:)	Amount of contribution (\$)
06/08/2021	Willis Johnson		500.00
Campaign Contribution	Contributor address; City; 1001 Belleview St Dal	State; Zip Code llas, TX 75215-1811	
Principal occupat	ion / Job title (See Instructions)	Employer (See Instruct	ions)
Date 06/14/2021	Full name of contributor out-of-state	PAC (ID#:)	Amount of contribution (\$) 250.00
Campaign Contribution	Contributor address; City; 731 S R L Thornton Frwy Dal	State: Zip Code llas, TX 75203	
Principal occupat	ion / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

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

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 10 of 13
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Tennell Atkins				
4 Date	5 Full name of contributor	out-of-state PAC	; (ID#:)	7 Amount of contribution (\$)
06/10/2021	Sam Coats			250.00
Campaign Contribution	6 Contributor address; 26 Ryddington Place	City; Dallas,	State; Zip Code TX 75230	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
06/08/2021	Michael Rader			500.00
Campaign Contribution	Contributor address; P.O. Box 249	City;	State; Zip Code ville, TX 76034	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
05/15/2021	Steven A Okon			1000.00
Campaign Contribution	Contributor address; 5844 Preston Haven Dr	City;	State; Zip Code TX 75230-2950	
Principal occu	 pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date 06/18/2021	Full name of contributor Vanessa A Hill	out-of-state PAC	(ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; P.O. Box 171424	City; Dallas,	State: Zip Code TX 75217	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)

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SCHEDULE A1

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

06/18/2021	Full name of contributor out-of-state PAC	(ID#:)	3 Filer ID (Ethics Commission Filers)	
4 Date 5 06/18/2021		(ID#:)	7.4	
06/18/2021		(ID#:)	7 A 1 5 1 11 11 (A)	
	Deficul Islam		7 Amount of contribution (\$)	
	Rafiqul Islam		500.00	
Campaign Contribution 6	Contributor address; City; 1706 Parkwood Dr Grapevi	State; Zip Code ine, TX 76061		
8 Principal occupat	ion / Job title (See Instructions)	9 Employer (See Instructi	ons)	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)	
06/16/2021	John S Chong		500.00	
Campaign Contribution	Contributor address; City; 927 Con Coppell	State; Zip Code I, TX 75019		
Principal occupation	on / Job title (See Instructions)	Employer (See Instructi	ons)	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)	
06/14/2021	H Giddings		500.00	
Campaign Contribution	Contributor address; City; 400 S Zang Blvd Suite 1016 Dallas,	State; Zip Code TX 75208		
Principal occupati	on / Job title (See Instructions)	Employer (See Instructi	ons)	
Date 06/14/2021	Full name of contributor	(ID#:)	Amount of contribution (\$) 500.00	
Campaign Contribution	Contributor address; City; 10020 Caribou Trail Dallas,	State: Zip Code TX 75238		
Principal occupati	on / Job title (See Instructions)	Employer (See Instructi	ons)	

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SCHEDULE A1

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

The	Instruction Guide explains how to complete t	his form.	1 Total pages Schedule A1: 12 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor out-of-state	PAC (ID#:)	7 Amount of contribution (\$)
06/18/2021	David G Juther Jr		25.00
Campaign Contribution	6 Contributor address; City; 619 Kessler Springs Dr Dal	State; Zip Code las, TX 75208	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	ctions)
Date	Full name of contributor	PAC (ID#:)	Amount of contribution (\$)
06/16/2021	Humberto Aranza		750.00
Campaign Contribution	Contributor address; City;	State; Zip Code las, TX 75205	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	tions)
Date	Full name of contributor	PAC (ID#:_TX	Amount of contribution (\$)
06/22/2021	William Ming Tzong		250.00
Campaign Contribution	Contributor address; City; 6922 Aspen Creek Ln Dal	State; Zip Code las, TX 75252-2702	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	stions)
Date 06/22/2021	Full name of contributor out-of-state Hashim Malik-Bey	PAC (ID#:)	Amount of contribution (\$) 250.00
Campaign Contribution	Contributor address; City; 6724 Verde Suite 329C Irvi	State: Zip Code ng, TX 75039-3415	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	l otions)

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SCHEDULE A1

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

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 13 of 13
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
06/22/2021	Vg Brook		250.00
Campaign Contribution	6 Contributor address; City; P.O. Box 140092 Irving, 7	State; Zip Code ΓX 75014-0092	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
06/18/2021	Kevin E Cho		250.00
Campaign Contribution	Contributor address; City; 1508 Summerside Dr Allen, T	State; Zip Code IX 75002	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (enter a satisfier) nechated above	<i>-</i> ,
1 Total pages Schedule F1: 1 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Fi	ilers)
4 Date	5 Payee name			
04/21/2021	Office Depot			
6 Amount (\$) 84.37 Campaign Funds for Campaign Expenditures	7 Payee address; 39759 LBJ Frwy Dallas, TX 75237	City;	State; Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	office supplies		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date	Payee name			
04/23/2021	Office Depot			
Amount (\$) 36.22 Campaign Funds for Campaign Expenditures	Payee address; 39759 LBJ Frwy Dallas, TX 75237	City;	State; Zip Code	
Campaign Expenditures	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	office supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date	Payee name			
05/03/2021	Cash Saver			
Amount (\$) 29.97 Campaign Funds for Campaign Expenditures	Payee address; 1201 W Camp Wisdom Dallas, TX 75232	City;	State; Zip Code	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 2 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
05/03/2021	Cash Saver			
6 Amount (\$) 95.96 Campaign Funds for Campaign Expenditures	7 Payee address; 1201 W Camp Wisdom Dallas, TX 75232	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	supplies		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
05/01/2021	Jefferson Monument			
Amount (\$) 350.00	Payee address; 1350 Manufacturing St Dallas, TX 75207	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Rent		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
06/01/2021	Jefferson Monument			
Amount (\$) 350.00	Payee address; 1350 Manufacturing St Dallas, TX 75207	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	1330 Manufacturing St. Danies, 111 /320/			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Office Overhead/Rental Expense	Supplies		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 3 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
05/03/2021	Home Depot			
6 Amount (\$) 77.76 Campaign Funds for Campaign Expenditures	7 Payee address; 2901 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	supplies		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
05/06/2021	ATT			
Amount (\$) 376.00	Payee address; P.O. Box 6811 Dallas, TX 75225	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	phone		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
06/02/2021	ATT			
Amount (\$) 384.25	Payee address; P.O. Box 6811 Dallas, TX 75225	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	1.0. Box 0011 Danias, 1X 13223			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	phone		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Council District 8	, canceriolaer aving	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 4 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	l	
06/17/2021	Elisha R Burrell		
6 Amount (\$) 100.00	7 Payee address; 6918 Sweet Sue Lane Dallas, TX 75241-3749	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Gift/Awards/Memorials Expense	Gift	
EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
06/22/2021	Sheena Swehia		
Amount (\$) 300.00	Payee address;	City;	State; Zip Code
Campaign Funds for	14727 Sherlock r Addison, TX 75001		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Event Expense	Photographer	
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
06/22/2021	Eddie Vinsac		
Amount (\$) 600.00	Payee address;	City;	State; Zip Code
Campaign Funds for	1900 Montauk Way Desoto, TX 75115-2736		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Event Expense	Band	
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (ether a satege	,
1 Total pages Schedule F1: 5 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date 04/22/2021	5 Payee name Sams Club			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
32.90 Campaign Funds for Campaign Expenditures	2900 W Wheatland Rd Dallas, TX 75237	Oity,	State,	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/26/2021	Sams Club			
Amount (\$) 32.10	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	2900 W Wheatland Rd Dallas, TX 75237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/26/2021	Sams Club			
Amount (\$) 16.20	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	2900 W Wheatland Rd Dallas, TX 75237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 6 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
04/26/2021	Sams Club		
6 Amount (\$) 34.97 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/26/2021	Sams Club		
Amount (\$) 41.90	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
04/29/2021	Sams Club		
Amount (\$) 44.92	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2900 W Wheatland Rd Dallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Orean Garar ayment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 7 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/03/2021	Sams Club		
6 Amount (\$) 44.02 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
05/04/2021	Sams Club		
Amount (\$) 47.28	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought	Office held
Date	Payee name		
05/10/2021	Sams Club		
Amount (\$) 33.60	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2900 w wheatiand Ru Danas, 1A /323/		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 8 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	l	
06/01/2021	Sams Club		
6 Amount (\$) 48.66	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2700 W Wilcattand Ru Danas, TX 13231		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
06/01/2021	Sams Club		
Amount (\$) 23.30	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2900 W Wheatland Rd Dallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
06/12/2021	Sams Club		
Amount (\$) 40.66	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2900 w wheatiand Ru Danias, 1A /323/		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Transportation Equipment & Related	gas	
OF EXPENDITURE	Expense		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

oreal card aymen	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 9 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commiss	ion Filers)
4 Date	5 Payee name			
06/01/2021	Sams Club			
6 Amount (\$) 57.95 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Co	ode
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office he	ld
Date	Payee name			
06/07/2021	Sams Club			
Amount (\$) 47.62	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Co	ode
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office he	d
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
06/07/2021	Sams Club			
Amount (\$) 22.29	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Co	ode
Campaign Funds for Campaign Expenditures	2700 W Wilcattana Rd Danias, TX 73237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	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 he	∍ld
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Orcal Garar aymon	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 10 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
06/11/2021	Sams Club			
6 Amount (\$) 42.30 Campaign Funds for	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
Campaign Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
06/15/2021	Sams Club			
Amount (\$) 34.37	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	,			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OF	Tennell Atkins	Council District 8		
Date	Payee name			
06/26/2021	Murphy USA 7674			
Amount (\$) 31.91	Payee address; 605 Uptown Blvd Cedar Hill, TX 75104	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	cedai filii, 17. 75104			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 11 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/24/2021	Murphy USA 7674		
6 Amount (\$) 40.52 Campaign Funds for Campaign Expenditures	7 Payee address; 605 Uptown Blvd Cedar Hill, TX 75104	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/26/2021	Popeyes		
Amount (\$) 21.39	Payee address; 338 E Camp Wisdom RdDuncanville, TX 75116	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
04/28/2021	Burger King		
Amount (\$) 20.31	Payee address; 2403 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2403 w wheatiand Rd Danas, 1X /323/		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/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 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/03/2021	Taco Bell		
6 Amount (\$) 27.12 Campaign Funds for Campaign Expenditures	7 Payee address; 4345 W Camp Wisdom Dallas, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
05/03/2021	Wingstop		
Amount (\$) 40.46	Payee address; 3333 W Camp Wisdom Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
06/14/2021	Wingstop		
Amount (\$) 36.90	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	3333 W Camp Wisdom Dallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Garer (errier a satege	.,
1 Total pages Schedule F1: 13 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name Williams Chicken			
05/03/2021		Cit	State	Zin Cada
6 Amount (\$) 115.97 Campaign Funds for	7 Payee address; 6226 Marvin D Love Fw Dallas, TX 75237	City;	State;	Zip Code
Campaign Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF	Food/Beverage Expense	food		
EXPENDITURE				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
05/03/2021	Subway			
Amount (\$) 158.04	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	1111 W Camp Wisdom Dallas, TX 75232			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
05/06/2021	KFC			
Amount (\$) 14.17	Payee address; 3415 W Camp Wisdom Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	5413 W Camp Wisdom Danas, 1X 13231			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	,	
1 Total pages Schedule F1: 14 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
06/01/2021	KFC			
6 Amount (\$) 29.17 Campaign Funds for Campaign Expenditures	7 Payee address; 3415 W Camp Wisdom Dallas, TX 75237	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
05/10/2021	Two Ponders Restaurant			
Amount (\$) 38.37	Payee address; 1441 Robert B Cullum B Dal las, TX 75210	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
05/13/2021	South Dallas Cafe			
Amount (\$) 65.46	Payee address; 7035 Marvin D Love FwtDallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	1035 Walvin D Love I wiganas, 174 13251			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Food/Beverage Expense	food		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 15 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
05/24/2021	Campisis			
6 Amount (\$) 60.05 Campaign Funds for Campaign Expenditures	7 Payee address; 1520 Elms St Suite 111 Dallas, TX 75201	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
05/24/2021	Chilis			
Amount (\$) 71.91	Payee address; 2503 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures		T 5		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
06/07/2021	JJ Fish & Chicken			
Amount (\$) 58.97	Payee address; 3302 W Camp Wisdom Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	3302 w Camp wisdom Danas, 1A /323/			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Food/Beverage Expense	food		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 16 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Com	mission Filers)
4 Date	5 Payee name			
06/07/2021	JJ Fish & Chicken			
6 Amount (\$) 10.27 Campaign Funds for Campaign Expenditures	7 Payee address; 3302 W Camp Wisdom Dallas, TX 75237	City;	State; Zi	p Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expen-	se
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office	e held
Date	Payee name			
06/15/2021	Lisa Soul Food Cafe			
Amount (\$) 59.51	Payee address; 2550 W Redbird Lane Suite 404	City;	State; Zi	p Code
Campaign Funds for Campaign Expenditures	Dallas, TX 75237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expens	se
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office	e held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
06/17/2021	Eddie Dean			
Amount (\$) 4112.96	Payee address; P.O. Box 1022 Terrell, TX 75160	City;	State; Zi	p Code
Campaign Funds for Campaign Expenditures	P.O. Box 1022 Terrell, TX 75160			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expens	se
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Offic	e held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	cale. (cine. a calegory normales apove)
1 Total pages Schedule F1: 17 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
06/22/2021	Eddie Dean		
6 Amount (\$) 576.44 Campaign Funds for Campaign Expenditures	7 Payee address; P.O. Box 1022 Terrell, TX 75160	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
06/23/2021	The Island Spot		
Amount (\$) 37.19 Campaign Funds for Campaign Expenditures	Payee address; 309 W Jefferson Dallas, TX 75208	City;	State; Zip Code
Cumpuign Emperioreures	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/21/2021	Gail Turner		
Amount (\$) 230.00 Campaign Funds for Campaign Expenditures	Payee address; 524 Sumac Place Desot, TX 75115	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 18 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	l	
04/28/2021	Gail Turner		
6 Amount (\$) 300.00	7 Payee address; 524 Sumac Place Desot, TX 75115	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Salaries/Wages/Contract Labor	labor	
OF EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
05/01/2021	Gail Turner		
Amount (\$) 320.00	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	524 Sumac Place DeSoto, TX 75115		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Salaries/Wages/Contract Labor	labor	
EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
04/22/2021	Cheryle Washington		
Amount (\$) 340.00	Payee address;	City;	State; Zip Code
Campaign Funds for	2310 N Henderson Ave Dallas, TX 75206		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Salaries/Wages/Contract Labor	labor	
EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Orean Garar ayment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 19 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics (Commission Filers)
4 Date	5 Payee name			
05/18/2021	Cheryle Washington			
6 Amount (\$) 225.00	7 Payee address; 2310 N Henderson Ave Dallas, TX 75206	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living e	xpense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	0	ffice held
Date	Payee name			
05/01/2021	Anita Burnett			
Amount (\$) 620.00	Payee address; 8823 E Valley Ranch Suite 136	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	Irving, TX 75063			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Salaries/Wages/Contract Labor	labor		
EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living ex	xpense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	0	ffice held
expenditure to benefit C/OF	Tennell Atkins	Council District 8		
Date	Payee name			
05/01/2021	James Virden			
Amount (\$) 983.00	Payee address; 3425 Hacienda Dr Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	5425 Hacienda Di Danas, 1A 75257			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living ex	rpense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	C	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Orean Garar ayment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 20 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/05/2021	James Virden		
6 Amount (\$) 250.00 Campaign Funds for	7 Payee address; 3425 Hacienda Dr Dallas, TX 75237	City;	State; Zip Code
Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
05/12/2021	LaShun Virden		
Amount (\$) 983.00	Payee address; 3425 Hacienda Dr Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor	
EXPENDITORE	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OF	Tennell Atkins	Council District 8	
Date	Payee name		
05/05/2021	LaShun Virden		
Amount (\$) 250.00	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	3425 Hacienda Dr Dallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Orean Garar ayment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 21 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/01/2021	Johnny M Green		
6 Amount (\$) 150.00	7 Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	1518 Cumberland Dr Cedar Hill, TX 75104		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
06/22/2021	Idella Thomas		
Amount (\$) 100.00	Payee address; 3789 Cripple Creed Dr Dallas, TX 75224	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	Story Chippie Circle B1 Bullus, 111 13221		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OF	Tennell Atkins	Council District 8	
Date	Payee name		
05/01/2021	MSCAS, LLC		
Amount (\$) 660.00	Payee address; 217 N I-35 E Desoto, TX 75115	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	217 N I-33 E Desoto, 1X /3113		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Polling Expense	labor	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 22 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
05/01/2021	MSCAS, LLC			
6 Amount (\$) 3330.00 Campaign Funds for Campaign Expenditures	7 Payee address; 217 N I-35 E Desoto, TX 75115	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Polling Expense	labor		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
05/02/2021	MSCAS, LLC			
Amount (\$) 339.00	Payee address; 217 N I-35 E Desoto, TX 75115	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense	labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
5.	Davis a series			
Date	Payee name			
05/05/2021	MSCAS, LLC			
Amount (\$) 194.00	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	217 N I-35 E Desoto, TX 75115			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Salaries/Wages/Contract Labor	labor		
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 23 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
05/14/2021	MSCAS, LLC			
6 Amount (\$) 494.85 Campaign Funds for Campaign Expenditures	7 Payee address; 217 N I-35 E Desoto, TX 75115	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
05/01/2021	Extra Space Storage			
Amount (\$) 261.00	Payee address; 39050 LBJ Frwy Dallas, TX 75232	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	0-1	Description		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Storage rental		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
06/01/2021	Extra Space Storage			
Amount (\$) 261.00	Payee address; 39050 LBJ Frwy Dallas, TX 75232	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	59030 LbJ Flwy Danas, 1A 73232			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Office Overhead/Rental Expense	Storage rental		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 24 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
05/01/2021	Phone Burner			
6 Amount (\$) 298.00 Campaign Funds for Campaign Expenditures	7 Payee address; 1968 S Coast Hwy Suite 1800 Lacquer Beach, CA 92651	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	phone		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
06/21/2021	Celebrate It! Balloons			
Amount (\$) 500.00 Campaign Funds for	Payee address; 1608 Whitlock Lane Suite E Carrollton, TX 75006	City;	State;	Zip Code
Campaign Expenditures	Curronion, 111 / 5000			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Event Expense	decorations		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
06/21/2021	Delightful Sweets			
Amount (\$) 221.40 Campaign Funds for Campaign Expenditures	Payee address; 324 E Beltline Road Suite 206 Desoto, TX 75115	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Event Expense	food		
	Check if travel outside of Tourse Commission Calculate T	Objectivity A	TV office believe by	
0 11 0000000000000000000000000000000000	Candidate / Officeholder name		n, TX, officeholder living	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense 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: 25 of 25	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
06/21/2021	TENNELL ATKINS		
6 Amount (\$) 15000.00	7 Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2717 MEADOW STONEDANAMETX 75232		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Loan Repayment/Reimbursement	loan re-payment	
OF EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name H Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE			
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	,	·	
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OF	1		
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED