CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	Total pages filed:135	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Debra Lynn NICKNAME LAST McBee	MI 	OFFICE USE ONLY Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE / OFFICEHOLDER		Dallas TX 75201 EXTENSION	Date Hand-delivered or Date Postmarked	
PHONE 6 CAMPAIGN	(214) 707 7065 MS / MRS / MR FIRST	MI	Receipt # Amount \$	
TREASURER NAME	Mr John NICKNAME LAST Levy	l	Date Processed Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SU 5839 Desco Drive	JITE #; CITY; STATE; Dallas TX 75225	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (972) 438 0126	EXTENSION		
9 REPORT TYPE	January 15 X 30th day before el		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year 01 / 01 / 2019	THROUGH 03	Day Year 25 2019	
11 ELECTION	ELECTION DATE Month Day Year Primary 05 / 04 / 2019 X General	ELECTION TYPE Runoff Other Description Special		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known Mayor		
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME		15	Filer ID (Ethics Commission Filers)
Debra Lynn McBee			
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANE	OTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITU DIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITH DISSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS URES.	HOUT THE CANDIDATE'S OR OFFICEHOLDER'S
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		
	SPECIFIC	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE	
	_	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 375760.14
EXPENDITURE TOTALS 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.		\$ 0.00	
	4. TOTAL	POLITICAL EXPENDITURES	\$ 292305.72
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST D ORTING PERIOD	\$ 680041.45
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THAY OF THE REPORTING PERIOD	\$ 350000.00
18 AFFIDAVIT		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.	
		ELECTRONICALLY CI	ERTIFIED
		Signature of Candi	date or Officeholder
AFFIX NOTARY STAM	P/SEALABOVE		
Sworn to and subsc	ribed before me, t	by the said Debra Lynn McBee	, this the 4th
day of <u>April</u>	, 20 <u></u> 19,	to certify which, witness my hand and seal of office.	
Signature of officer a	administering oath	Printed name of officer administering oath	Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE 1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 3. SCHEDULE B: PLEDGED CONTRIBUTIONS 4. SCHEDULE E: LOANS 5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS 5. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS 8 0.00 9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS \$ 0.00 9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS \$ 0.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 8,282.90 3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 0.00 4. SCHEDULE E: LOANS \$ 350,000.00 5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ 292,305.70 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 0.00 7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS \$ 0.00 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 0.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 0.00 4. SCHEDULE E: LOANS \$ 350,000.00 5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ 292,305.70 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 0.00 7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS \$ 0.00 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 0.00
4. SCHEDULE E: LOANS \$ 350,000.00 5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ 292,305.70 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 0.00 7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS \$ 0.00 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 0.00
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ 292,305.70 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 0.00 7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS \$ 0.00 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 0.00
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 0.00 7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS \$ 0.00 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 0.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS \$ 0.00 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 0.00
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 0.00
SCHEDOLE 14. EXI ENDITORIES MADE BY ORIENT CARD
0 000
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL 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 POLITICAL CONTRIBUTIONS \$ 0.00
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS \$ 0.00

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 1 of 99	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McB	ee			
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)	
01/01/2019	Christine Heskes		75.00	
	6 Contributor address; City; State	; Zip Code		
	6118 Fieldcrest Lane Sachse	, TX 75048		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
01/01/2019	Sherry Travers		100.00	
01/01/2019	Contributor address; City; State	; Zip Code	100.00	
		TX 75219		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	cions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
01/02/2019	Robert Connor		2500.00	
Contributor address; City; State; Zip Code				
3505 Turtle Creek Blvd. Suite 12A Dallas, TX 75219				
	33 03 Turke Creek Biva, Suite 1211 Builds,	111 /321)		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
01/02/2019	Sandra Connor	,	2500.00	
01, 02, 201,	Contributor address:		2500.00	
	Contributor address; City; State 31 Hickory Hills Circle Little F	Rock, AR 72212		
		,		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 2 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)
01/02/2019	Edward Halsell		200.00
01/02/2017	6 Contributor address; City; State;	Zip Code	200.00
	4381 San Carlos Street Dallas, T	ΓX 75205	
O Deireireles			·
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/02/2019	Sally Hoglund		5000.00
01/02/2019	Contributor address; City; State;	Zip Code	3000.00
	3510 Turtle Creek Blvd. Suite 3A Dallas, T	ΓX 75219	
Principal occur	ation / Job title (See Instructions)	Employer (See Instructi	ione)
i illicipal occup	ation 7 000 title (Gee instructions)	Employer (Gee maraci	ons
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/02/2019	Emily Somerville		150.00
Contributor address; City; State; Zip Code			150.00
		ΓX 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#·	Amount of contribution (\$)
01/02/2019	Jennifer Tobin)	100.00
	Contributor address; City; State;	Zip Code	
		ΓX 75230	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 3 of 99
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	See .	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
01/03/2019	H. Craig Evans	500.00
	6 Contributor address; City; State; Zip Code	
	P.O. Box 25131 Dallas, TX 75225	
8 Principal occu	pation / Job title (See Instructions) 9 Employer (S	See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
01/03/2019	Leon Kaplan	500.00
	Contributor address; City; State; Zip Code	
	4216 Versailles Dallas, TX 75205	
Principal occup	pation / Job title (See Instructions) Employer (S	See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
01/03/2019	Mersina Stubbs	1000.00
	Contributor address; City; State; Zip Code 4618 Edmondson Avenue Dallas, TX 75209	
Principal occup	pation / Job title (See Instructions) Employer (S	See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
01/03/2019	J. McDonald Williams	1000.00
	Contributor address; City; State; Zip Code 5646 Milton Street Suite 407 Dallas, TX 75206	
Principal occup	pation / Job title (See Instructions) Employer (S	See Instructions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 4 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
01/04/2019	Carl Sewell		5000.00
6 Contributor address; City; State; Zip Code			3000.00
	3860 W. Northwest HWY Suite 102 Dallas, 7	ΓX 75220	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
C 1			
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/04/2019	Lisa Singleton		500.00
	Contributor address; City; State;	Zip Code	
	4413 Potomac Avenue Dallas, 7	ΓX 75205	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/05/2019	Jennifer Altabef		2500.00
	Contributor address; City; State;	Zip Code	
	10235 Strait Lane Dallas, 7	ГХ 75229	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/05/2019	Peter Altabef	,	2500.00
	Contributor address; City; State;	Zip Code	
		ГХ 75229	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	Total pages Schedule A1: 5 of 99
2 FILER NAME		3	Filer ID (Ethics Commission Filers)
Debra Lynn McI	Bee		
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID)#: <u>_</u>	7 Amount of contribution (\$)
01/06/2019	Koshi Dhingra		250.00
01/00/2019	6 Contributor address; City; State;		250.00
	6255 Prestonshire Lane dallas, TX	X 75225	
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instruction	ns)
Date	Full name of contributor out-of-state PAC (ID)#:)	Amount of contribution (\$)
01/07/2019	Robert Culak		50.00
01/07/2019	Contributor address; City; State;	Zip Code	20.00
	1223 Kings Hwy Dallas, TX	X 75208	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	is)
Date	Full name of contributor out-of-state PAC (ID)#:)	Amount of contribution (\$)
01/07/2019	Beth Lloyd		75.00
	Contributor address; City; State; 16220 Ranchita Drive Dallas, TX	•	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ns)
Date	Full name of contributor out-of-state PAC (ID)#:	Amount of contribution (\$)
01/08/2019	David Feld		250.00
	Contributor address; City; State; 4666 Belclaire Ave. Dallas, TX	Zip Code	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ns)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 6 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state_PAC	(ID#:)	7 Amount of contribution (\$)
01/08/2019	Patricia Leyendecker		5000.00
01/00/2019	6 Contributor address; City; State;	Zip Code	3000.00
	4606 Gilbert Avenue Dallas,	TX 75219	
O Deireireles	antices / Ind. Athle (Con. Instructions)		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	ions)
5 .	Full name of contributor	(ID)	
Date		(ID#:)	Amount of contribution (\$)
01/09/2019	Steve Ivy		500.00
	Contributor address; City; State;	Zip Code	
	5430 Northbrook Drive Dallas, 7	TX 75220	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
01/09/2019	Linda Ivy		500.00
01/09/2019	Contributor address:		300.00
	Contributor address; City; State; 5430 Northbrook Drive Dallas,	Zip Code TX 75220	
	o loo i lorano de directione de la constante d	111 / 0 = 2 0	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
01/10/2019	Susie and Joel Carp		1500.00
	Contributor address; City; State;	Zip Code	
	6322 Park Lane Dallas,	TX 75225	
Principal occur	ation / Job title (See Instructions)	Employer (See Instructi	ions)
T Tillolpai Goods	audity obs time (eee mendedone)	Employer (Goo mondo	

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 7 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McF	ee		
4 Date	5 Full name of contributor out-of-state PAC (I	D#:)	7 Amount of contribution (\$)
01/10/2019	Laura Gross		100.00
	6 Contributor address; City; State;	Zip Code	
	27 Lincoln Place Brooklyn	n, NY 11217	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/10/2019	Amanda Ward		30.00
	Contributor address; City; State;	Zip Code	
	6040 Preston Creek Drive Dallas, T	TX 75240	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/11/2019	Marycook Blanshard		100.00
	Contributor address; City; State; 4424 Manning Dallas, T	Zip Code TX 75220	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#·)	Amount of contribution (\$)
01/11/2019	Megan Murphy		150.00
	· · · · · · · · · · · · · · · · · · ·	Zip Code esville, VA 22903	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 8 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state_PAC	(ID#:)	7 Amount of contribution (\$)
01/12/2019	Peggy Allison		100.00
01/12/2019	6 Contributor address; City; State;	Zip Code	100.00
	10601 Inwood Road Dallas, '	TX 75229	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
• Timolpai occu	(Crionounam see (See manacina)	5 Employer (See manden	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/12/2019	Ann Hallam		100.00
01/12/2019	Contributor address; City; State;	Zip Code	100.00
	5521 Southwestern Blvd Dallas, '	TX 75209	
Deire sie al. a a com	ation / Jah title (Con Jahrantiana)		(
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/12/2019	Mona Munson		1000.00
01/12/2017	Contributor address; City; State;	Zip Code	1000.00
		TX 75220	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(104)	Amount of contribution (\$\)
01/13/2019	Holly Huffines	(ID#)	Amount of contribution (\$) 1000.00
01/13/2017	Contributor address; City; State;	Zip Code	1000.00
		son, TX 75080	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this for	m.	1 Total pages Schedule A1: 9 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McF	ee		
4 Date	5 Full name of contributor out-of-state PAC (ID#	::)	7 Amount of contribution (\$)
01/14/2019	Diana Bearden		25.00
01/14/2019	6 Contributor address; City; State;	Zip Code	23.00
	6936 Lakewood Blvd Dallas, TX	75214	
O Deire in all a con-)
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	:)	Amount of contribution (\$)
01/14/2019	Nancy Carter		1500.00
	Contributor address; City; State;	Zip Code	
	4000 Bryn Mawr Drive Dallas, TX	75225	
Principal occur	ation / Job title (See Instructions)	Employer (See Instruction	ons)
	,		,
Date	Full name of contributor ut-of-state PAC (ID#		A
	Emily Durante		Amount of contribution (\$)
01/14/2019	· · · · · · · · · · · · · · · · · · ·		25.00
	-	Zip Code	
	4206 Merrell Road Suite 160 Dallas, TX	. 15229	
Principal occup	nation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID#	f:)	Amount of contribution (\$)
01/14/2019	Faisal Halum		100.00
	Contributor address; City; State; Z	_	
	3503 Springbrook Street Dallas, TX	_	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruction	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 10 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor uut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
01/14/2019	Mimi Sterling		100.00
	6 Contributor address; City; State;	Zip Code	
	711 Clermont Street Dallas,	TX 75223	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/14/2019	Piper Wyatt		500.00
01/14/2017	Contributor address; City; State;	; Zip Code	300.00
	5538 Falls Road Dallas,	TX 75220	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/15/2019	Scott Alexander		500.00
	Contributor address; City; State; 3630 University Dallas,	Zip Code TX 75205	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/15/2019	Allison Eagan		50.00
	Contributor address; City; State; 4307 Irvin Simmons Drive Dallas,		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form	1	Total pages Schedule A1: 11 of 99
2 FILER NAME		3	Filer ID (Ethics Commission Filers)
Debra Lynn Mc	Bee		
4 Date	5 Full name of contributor out-of-state PAC (ID#:		7 Amount of contribution (\$)
01/15/2019	Leigh Anne Haugh		250.00
	6 Contributor address; City; State; Zip		
	4428 Windsor Parkway Dallas, TX 7	5205	
8 Principal occi	upation / Job title (See Instructions) 9 E	mployer (See Instruction	ns)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)
01/15/2019	Lisa Longino		100.00
		o Code	
	4636 N Versailles Avenue Dallas, TX 7	5209	
Principal occu	pation / Job title (See Instructions)	mployer (See Instruction	ns)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)
01/15/2019	James Sears		100.00
01/10/2019	Contributor address; City; State; Zig P.O. Box 670372 Dallas, TX 7		
Principal occu	pation / Job title (See Instructions)	mployer (See Instruction	ns)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)
01/15/2019	Cindy Stager		250.00
	Contributor address; City; State; Zip 5022 W Amherst Dallas, TX 7	Code	
Principal occu	pation / Job title (See Instructions)	mployer (See Instruction	ns)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 12 of 99
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Debra Lynn McF	ee	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
01/15/2019	Herb Weichsel	1000.00
	6 Contributor address; City; State; Zip	Code
	6435 Northwood Road Dallas, TX 75	225
8 Principal occu	pation / Job title (See Instructions) 9 Em	ployer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
01/15/2019	Michael White	100.00
01/13/2017	Contributor address; City; State; Zip	
	5431 Richmond Ave Dallas, TX 75	
Principal occup	ation / Job title (See Instructions)	ployer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
01/16/2019	Catherine Brady	250.00
	Contributor address; City; State; Zip of 5723 Meadow Crest Drive Dallas, TX 75.	Code
Principal occup	pation / Job title (See Instructions)	ployer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
01/16/2019	Melina McKinnon Cain	25.00
	Contributor address; City; State; Zip C 5706 E Mockingbird Lane Suite 115 Dallas, TX 75	Code
Principal occup	pation / Job title (See Instructions)	ployer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 13 of 99				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McE	iee			
4 Date	5 Full name of contributor out-of-state PAC (I	(ID#:)	7 Amount of contribution (\$)	
01/16/2019 Nita Clark			250.00	
6 Contributor address; City; State; Zip Code		Zip Code		
	5519 Wenonah Dr Dallas, T	ΓX 75209		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ione)	
6 Filicipal occu	Sation / 300 title (See Instructions)	, Employer (See instructi	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
01/16/2010	Cullum Clark		250.00	
01/16/2019	Contributor address; City; State;	Zip Code	230.00	
		ГX 75209		
	5517 Wellohali Di Bahas, 1	1X 1320)		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date		(ID#:)	Amount of contribution (\$)	
01/16/2019	Jeremy Cortez		100.00	
	Contributor address; City; State;	Zip Code		
	2000 N Garrett Suite 3017 Dallas, T	ΓX 75206		
District control			•	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	ID#:	Amount of contribution (\$)	
01/16/2019	Elizabeth & Lance Deal	,	200.00	
01/10/2019			200.00	
	Contributor address; City; State; 111 Hogan Drive Gainesvi	ille, TX 76240		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this for	rm.	1 Total pages Schedule A1: 14 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	Bee		
4 Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7 Amount of contribution (\$)
01/16/2019	01/16/2019 Heidi Dillon		200.00
6 Contributor address; City; State; Zip Code			
	3822 Turtle Creek Drive Dallas, TX	ζ 75219	
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructi	ions)
Date	Full name of contributor	#:)	Amount of contribution (\$)
01/16/2019	Cristy Ecton Contributor address; City; State;	Zip Code	50.00
	4031 Holland Avenue Suite D Dallas, TX		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	#:)	Amount of contribution (\$)
01/16/2019	Berta Fogerson		100.00
	Contributor address; City; State; 3790 Cedarplaza Lane Suite 2126 Dallas, TX	•	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	#:)	Amount of contribution (\$)
01/16/2019	Vince & Angela Gadfis		100.00
	Contributor address; City; State; 28566 Stults Road Dallas, TX	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 15 of 99
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
01/16/2019	Christina Geyer	100.00
01/10/2019	6 Contributor address; City; State; Zip C	
	2400 Bennett Avenue Suite 2214 Dallas, TX 752	206
8 Principal occu	pation / Job title (See Instructions) 9 Em	ployer (See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
01/16/2010	Jeff Goke	
01/16/2019	Contributor address; City; State; Zip 6	100.00
	510 South Congress Suite 306 Austin, TX 78	
Principal occup	eation / Job title (See Instructions) Em	ployer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
01/16/2019	Sue Gragg	1000.00
	Contributor address; City; State; Zip C 4009 McFarlin Blvd Dallas, TX 752	
Principal occup	eation / Job title (See Instructions)	ployer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
01/16/2019	Carol Holmes	100.00
	Contributor address; City; State; Zip C 6125 Morningside Avenue Dallas, TX 752	Code
Principal occup	pation / Job title (See Instructions)	ployer (See Instructions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 16 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	Ree		
4 Date		D#:)	7 Amount of contribution (\$)
01/16/2019 Mary Hubbard			100.00
	6 Contributor address; City; State;	Zip Code	
	4121 Bryn Mawr Drive Dallas, T	X 75225	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of contribution (\$)
01/16/2019			100.00
	Contributor address; City; State; 231 Oakleaf Drive San Anto	Zip Code	
	231 Oakieai Drive San Anto	onio, TX 78209	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/16/2019	Mary Kate Jeffries		100.00
	Contributor address; City; State; 6953 Arboreal Drive Suite 3rdFl Dallas, T	·	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of contribution (\$)
01/16/2019	Martha Kimmerling		2500.00
	Contributor address; City; State; 3831 Turtle Creek Blvd. Suite 10B Dallas, T	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
	-		

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 17 of 99				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McE	ee			
4 Date	5 Full name of contributor out-of-state PAC (I	(ID#:)	7 Amount of contribution (\$)	
01/16/2019 Meg Munson McGonigle		50.00		
	6 Contributor address; City; State;	Zip Code		
	4224 San Carlos Dallas, T	ΓX 75205		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)	
• I Illicipal occu	Sation / Job title (Gee Histractions)	• Employer (See manuch	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
01/16/2019	Kersten Rettig		250.00	
01/10/2019	Contributor address; City; State;		230.00	
	4415 Edmondson Avenue Dallas, T	ΓX 75205		
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
01/16/2010	Serena Ritch			
01/16/2019 100.00				
	Contributor address; City; State; 7612 Marquette Dallas, T	ΓX 75225		
	7012 Manquette Sumus, 1	111 73223		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor			
	Alisha Sinacola	(ID#:)	Amount of contribution (\$)	
01/16/2019			500.00	
	Contributor address; City; State; 3617 Crescent Avenue Dallas, T	Zip Code ΓX 75205		
	5017 Crescent Avenue Danas, 1	1A 73203		
Principal occur	pation / Job title (See Instructions)	Employer (See Instructi	ions)	
			,	

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 18 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)
01/16/2019	01/16/2019 Donald Stokes		250.00
6 Contributor address; City; State; Zip Code			
	1193 Tranquilla Dr Dallas, T	ΓX 75218	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
6 Principal occu	Sation / Job title (See instructions)) Employer (See instructi	ions)
Date	Full name of contributor ut-of-state PAC (I	ID#:)	Amount of contribution (\$)
01/16/2019	Jennifer Swift Houser		200.00
01/10/2019	Contributor address; City; State;	Zip Code	200.00
	2313 Nicholas Waco, T.		
	2515 110110103	X 70/12	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#.	
		ID#:)	Amount of contribution (\$)
01/16/2019	Max Wells		2500.00
Contributor address; City; State; Zip Code			
	3831 Turtle Creek Blvd. Suite 10-B Dallas, T	TX 75219	
Principal occur	pation / Job title (See Instructions)	Employer (See Instructi	ione\
FIIICIPAI OCCU _R	ation / Job title (See instructions)	Employer (Occ manaon	ions)
Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of contribution (\$)
01/16/2019	Wynne & Craig Wideman		100.00
	Contributor address; City; State;		
		ГX 75205	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 19 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	United the state of the state o		7 Amount of contribution (\$)
01/17/2019	Barbara Buzzell		100.00
6 Contributor address; City; State; Zip Code			
	3883 Turtle Creek Blvd Suite 1406 Dallas, T	CX 75219	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/17/2019	Lissie Donosky Contributor address; City; State;		500.00
	•	TX 75225	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of contribution (\$)
01/17/2019	James Hatcher		100.00
	Contributor address; City; State; 14809 Southview Trail Little Elr	Zip Code m, TX 75068	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date		ID#:)	Amount of contribution (\$)
01/17/2019	William Helmbrecht		1000.00
	Contributor address; City; State; 4581 Rheims Place Dallas, T		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
	<u> </u>		

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 20 of 99				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McB	ee			
4 Date		(ID#:)	7 Amount of contribution (\$)	
01/17/2019 Merriellin Lehner			50.00	
6 Contributor address; City; State; Zip Code				
	6906 Westlake Avenue Dallas, T	ΓX 75214		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
01/17/2019	Allison Miller		100.00	
01/17/2019	Contributor address; City; State;	Zip Code	100.00	
		ГX 75248		
	5025 Clour Buy Brive Burnus, 1	171 732 10		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
01/17/2019	Betty Nelson		100.00	
	Contributor address; City; State;	Zip Code		
		ΓX 75225		
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor out-of-state PAC (I	(ID#:)	Amount of contribution (\$)	
01/17/2019	Fay Sheehan		100.00	
	Contributor address; City; State; 6207 Stichter Dallas, T			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 21 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor ☐ out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
01/17/2019	Carter Tolleson		5000.00
01/17/2019	6 Contributor address; City; State;	Zip Code	3000.00
	·	TX 75205	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/18/2019	Katherine Coker		100.00
	Contributor address; City; State;	; Zip Code	
	3916 Purdue Avenue Dallas,	TX 75225	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/18/2019	Mary Davis		100.00
	Contributor address; City; State; 14 Ashmere Court Dallas,	Zip Code TX 75225	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/18/2019	Natalie Devero	,	100.00
Contributor address; City; State; Zip Code 4242 Lomo Alto Drive Suite S26 Dallas, TX 75219			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 22 of 99				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McE	ee			
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)	
01/18/2019	Fredye Factor		300.00	
6 Contributor address; City; State; Zip Code				
	8616 Turtle Creek Blvd. Suite 209 Dallas, T	X 75225		
0 5: : :				
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)	
Date	Full name of contributor ut-of-state PAC (I	ID#:)	Amount of contribution (\$)	
04/40/2040	Christine McKenny			
01/18/2019	e e e e e e e e e e e e e e e e e e e		500.00	
	Contributor address; City; State;			
	4049 Stanford Avenue Dallas, T	.X /3223		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
			·	
Date	Full name of contributor ut-of-state PAC (I	ID#:)	Amount of contribution (\$)	
01/19/2019	Anne & Jeremy Besser		100.00	
Contributor address; City; State; Zip Code				
	•	TX 75230		
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date				
	Full name of contributor out-of-state PAC (I Brenda Brodrick	ID#:)	Amount of contribution (\$)	
01/19/2019			10.00	
		Zip Code		
	13531 Rawhide Pkwy Dallas, T	TX 75235		
District control				
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	Total pages Schedule A1: 23 of 99
2 FILER NAME		3	Filer ID (Ethics Commission Filers)
Debra Lynn McF	ee		
4 Date	5 Full name of contributor out-of-state PAC (I	D#:	7 Amount of contribution (\$)
01/19/2019	Carol Huckin		100.00
01/19/2019	6 Contributor address; City; State;	Zip Code	100.00
	3605 Caruth Blvd Dallas, T	X 75225	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ne)
• Timolpai occu	Section 7 Good title (Gee mattacitoris)	Employer (eee mandener	
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/19/2019	Jolie Humphrey		250.00
	Contributor address; City; State;	Zip Code	
	3500 Lexington Avenue Dallas, T	X 75205	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	is)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/19/2019	Alison Hunsicker		1000.00
01/15/2015	Contributor address; City; State; 4901 Cole Ave Dallas, T		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ns)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/19/2019	Cayce Kemp		100.00
	Contributor address; City; State; 4501 Edmondson Dallas, T	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ns)
Principal occuş			ns)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 24 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date		ID#:)	7 Amount of contribution (\$)
01/19/2019	Travis Knox		500.00
	6 Contributor address; City; State;		
	9709 Stone River Circle Dallas, T	ΓX 75231	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/19/2019	Gigi Lancaster		100.00
01/19/2019	Contributor address; City; State;		100.00
	•	ΓX 75205	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of contribution (\$)
01/19/2019	Jennifer LeLash		25.00
Contributor address; City; State; Zip Code			
		TX 75248	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of contribution (\$)
01/19/2019	Natalie Lesikar		100.00
	Contributor address; City; State; 4362 Santa Barbara Drive DALLAS		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this for	form.	1 Total pages Schedule A1: 25 of 99	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McI	s ee			
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)	
01/19/2019	Gigi Potter Salley		100.00	
	6 Contributor address; City; State;	Zip Code		
	7037 Turtle Creek Blvd Dallas, T	ΓX 75205		
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)	
Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of contribution (\$)	
	Cindy Turner			
01/19/2019			250.00	
	Contributor address; City; State;			
	5430 Yolanda Lane Dallas, T	TX 75229		
Principal occur	pation / Job title (See Instructions)	Employer (See Instruction	ons)	
	,		,	
Date	Full name of contributor	ID#:)	Amount of contribution (\$)	
01/19/2019	James Wiegert		100.00	
Contributor address; City; State; Zip Code				
		TX 75214		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)	
_				
Date		ID#:)	Amount of contribution (\$)	
01/20/2019	Megan Pharis		50.00	
	Contributor address; City; State;	Zip Code		
	7602 Chadwick Court Dallas, T	TX 75248		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)	

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SCHEDULE A1

The	e Instruction Guide explains how to complete this for	rm. 1	Total pages Schedule A1:
2 FILER NAME			26 of 99 3 Filer ID (Ethics Commission Filers)
Debra Lynn Mc			1 1101 15 (241100 00
4 Date		#:	7 Amount of contribution (\$)
01/20/2019	Andrea Weber		100.00
	6 Contributor address; City; State;	Zip Code	
	3601 Caruth Blvd Dallas, TX	K 75225	
8 Principal occ	upation / Job title (See Instructions) 9	Employer (See Instruction	is)
Date	Full name of contributor	#:)	Amount of contribution (\$)
01/21/2019		Zip Code	1000.00
	3838 Oak Lawn Avenue Suite 1550 Dallas, TX	K 75219	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction:	as)
Date	Full name of contributor	#:)	Amount of contribution (\$)
01/21/2019	Lacy Ball		10.00
	Contributor address; City; State; 6122 Danbury Dallas, TX	•	
Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	us)
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of contribution (\$)
01/21/2019	Mary Parker		250.00
	Contributor address; City; State; 2 4715 W Amherst Avenue Dallas, TX	Zip Code	
Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	us)
1			

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SCHEDULE A1

The	1 Total pages Schedule A1: 27 of 99				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Debra Lynn McB	ee				
4 Date	5 Full name of contributor uut-of-state PAC	(ID#:)	7 Amount of contribution (\$)		
01/21/2019	Myrna Schlegel		5000.00		
	6 Contributor address; City; State	; Zip Code			
	4444 Valley Ridge Road Dallas,	TX 75220			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)		
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)		
01/21/2019	Kimberly Schlegel-Whitman		5000.00		
01/21/2019	Contributor address; City; State	; Zip Code	2000.00		
		TX 75220			
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)		
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)		
01/21/2019	William Weaver		500.00		
Contributor address; City; State; Zip Code 1845 Woodall Rodgers Freeway Suite Dans, TX 75201					
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)		
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)		
01/22/2019	Mark Breidenbach		50.00		
	Contributor address; City; State	; Zip Code			
	-	TX 75228			
	·				
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)		

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 28 of 99	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McE	ee			
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)	
01/22/2019	Steven Durham		1000.00	
	6 Contributor address; City; State;	Zip Code		
	9149 Clearlake Drive Dallas, T	ΓX 75225		
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	ID#:)	Amount of contribution (\$)	
01/22/2019	Susan Geyer		500.00	
01/22/2019	Contributor address; City; State;	Zip Code	300.00	
	-	ΓX 75225		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ions)	
Date	Full name of contributor	ID#:)	Amount of contribution (\$)	
01/22/2019	Carol Heller		5000.00	
	Contributor address; City; State; 4416 Lakeside Drive Dallas, T	Zip Code ΓX 75205		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	ID#:)	Amount of contribution (\$)	
01/22/2019	Marvin/Joan Lane		250.00	
Contributor address; City; State; Zip Code 8060 Frankford Road Suite 319 Dallas, TX 75252				
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 29 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC (II	ID#:)	7 Amount of contribution (\$)
01/22/2019	Nicholas McCord		2500.00
	6 Contributor address; City; State;		
	25 Highland Park Village 100 Suite 3Bhllas, T	TX 75205	
9 Principal coor	pation / Job title (See Instructions)	Employer (See Instructi	iona)
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC (II	ID#:)	Amount of contribution (\$)
01/00/0010	Steven Davis		
01/23/2019	Contributor address; City; State;	Zin Codo	2000.00
	4427 Glenleigh Drive Dallas, T	.A 13220	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date		ID#:)	Amount of contribution (\$)
01/23/2019	Gina Ginsburg		100.00
Contributor address; City; State; Zip Code			
	4720 Irvin Simmons Drive Dallas, T	TX 75229	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:	Amount of contribution (\$)
01/23/2019	Sabrina Schiller)	***
01/23/2019			1000.00
		Zip Code FX 75225	
	5420 Cardin Biva Banas, 1	.A 13223	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
	,		•

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 30 of 99
2 FILER NAME Debra Lynn McB			3 Filer ID (Ethics Commission Filers)
4 Date 01/23/2019	5 Full name of contributor □ out-of-state PAC Robert Vial 6 Contributor address; City; State; 10623 Sandpiper Lane □ Dallas,	TX 75230	7 Amount of contribution (\$) 300.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ons)
Date 01/23/2019	Melissa Wickham Contributor address; City; State;		Amount of contribution (\$) 100.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 01/24/2019	Tiffany Divis Contributor address; City; State;	Zip Code TX 75209	Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 01/24/2019	Paul Divis Contributor address; City; State;		Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 31 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date		(ID#:)	7 Amount of contribution (\$)
01/25/2019	Dan Patterson		500.00
	6 Contributor address; City; State;	Zip Code	
	3201 Wendover Road Dallas, '	TX 75214	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/25/2019	Kix Quinn		500.00
01,23,2019	Contributor address; City; State;	Zip Code	300.00
	3508 Lexington Avenue Dallas,	TX 75205	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/26/2019	Judy Clemments		250.00
	Contributor address; City; State; 5815 Swiss Avenue Dallas,	Zip Code TX 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/26/2019	Bragg and Jill Smith		250.00
	Contributor address; City; State; 4012 Windsor Avenue Dallas,		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	1 Total pages Schedule A1: 32 of 99				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Debra Lynn McB	ee				
4 Date	5 Full name of contributor uut-of-state PAC	(ID#:)	7 Amount of contribution (\$)		
01/27/2019	Roslyn Dawson Thompson		150.00		
	6 Contributor address; City; State	; Zip Code			
	2 Abbotford Court Dallas,	TX 75225			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)		
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)		
01/27/2019	Carolyn Peck		100.00		
01/21/2019	Contributor address; City; State	; Zip Code	100.00		
		TX 75205			
	,				
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)		
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)		
01/28/2019	Douglas Hawthorne		500.00		
Contributor address; City; State; Zip Code					
		TX 75205			
	1125 I otomice Tronde Bunds,	111 73203			
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)		
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)		
01/28/2019	Lindi Loy		25.00		
	Contributor address; City; State	: Zip Code			
	7526 W Northwest Highway Suite 9 Dallas,				
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)		

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 33 of 99		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Debra Lynn McE	ee				
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)		
01/28/2019	Missy Payne		100.00		
	6 Contributor address; City; State;	Zip Code			
	3026 Mockingbird Lane Suite 117 Dallas,	TX 75205			
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 (\$)		
01/29/2019	Allie Beth Allman		500.00		
01/23/2013	Contributor address; City; State;		300.00		
	4242 Lomo Alto Drive Suite N1001 Dallas,				
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)		
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)		
01/29/2019	Pierce Allman		500.00		
01/29/2019					
	Contributor address; City; State; 4242 Lomo Alto Drive Suite N1001 Dallas,				
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)		
	,		,		
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)		
01/29/2019	David Gonzalez		1000.00		
	Contributor address; City; State;				
	5910 N. Central Expressway Suite 175% llas,				
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)		
	1				

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 34 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC (ID	D#:)	7 Amount of contribution (\$)
01/29/2019	David Haemisegger		5000.00
01/29/2019	6 Contributor address; City; State;	Zip Code	3000.00
	8080 North Central Expressway Suite Dallow, T.	X 75206	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/29/2019	Sophie Levy Zuckerman		100.00
01/23/2013	Contributor address; City; State;	Zip Code	100.00
	5314 W University Blvd Dallas, T	X 75209	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/29/2019	David Shallenberger		50.00
	Contributor address; City; State; 1200 Main Street Suite 2109 Dallas, T.	·	
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/30/2019	Elizabeth Arpey		2500.00
		Zip Code lle, TX 76034	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 35 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC (II	D#:)	7 Amount of contribution (\$)
01/30/2019	Holly Bock		100.00
01/30/2017	6 Contributor address; City; State;	Zip Code	100.00
	4131 Prescott Avenue Dallas, T	X 75219	
O Deire in all a servi			·
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/30/2019	Amy Campbell Cole		250.00
01/30/2019	Contributor address; City; State;	Zip Code	250.00
	P.O. Box 1557 Lampasa	s, TX 76550	
Principal accur	ation / Job title (See Instructions)	Employer (See Instructi	(ana)
Fillicipal occup	ation / Job title (See Instructions)	Employer (See instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/30/2019	Leslie Ficke		250.00
01/30/2019	Contributor address; City; State;	Zip Code	250.00
	4620 Arcady Dallas, T	·	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/30/2019	William Graue	σπ	500.00
01/00/2019	Contributor address; City; State;	Zip Code	
	5340 Meadow Crest Drive Dallas, T		
Driveinal accur	pation / Job title (See Instructions)	Employer (Con Instruct	iona)
Fillicipal occup	auton / Job title (See instructions)	Employer (See Instructi	ions)
	·		

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 36 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	ee		
4 Date		(ID#:)	7 Amount of contribution (\$)
01/30/2019	Peter Lynch		100.00
	6 Contributor address; City; State;	Zip Code	
	3824 Sleepy Lane Dallas, T	ΓX 75229	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor	[ID#:)	Amount of contribution (\$)
01/30/2019	Carolyn McBee		25.00
	Contributor address; City; State;	Zip Code	
	3242 Southwestern Dallas, T	ΓX 75225	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/30/2019	Aileen Pratt		250.00
	Contributor address; City; State; 5055 Park Lane Dallas, T	Zip Code ΓX 75220	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/30/2019	Sarah Rathjen		100.00
	Contributor address; City; State; 4629 S. Versailles Dallas, T		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 37 of 99
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	ee	
4 Date	5 Full name of contributor out-of-state_PAC (ID#:	7 Amount of contribution (\$)
01/30/2019	Patty Jo Turner	500.00
0 - 7 - 0 - 7	6 Contributor address; City; State; Zip Co	
	19 Glenmeadow Court Dallas, TX 7522	25
8 Principal occu	pation / Job title (See Instructions) 9 Empl	loyer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
01/30/2019	Chart Westcott	1000.00
01/30/2019	Contributor address; City; State; Zip Co	
	100 Crescent Court Suite 1620 Dallas, TX 7520	01
Principal occup	ation / Job title (See Instructions) Emplo	loyer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
02/01/2019	Don Clampitt	500.00
	Contributor address; City; State; Zip Co	
	9207 Ambassador Row Dallas, TX 7524	17
Principal occup	pation / Job title (See Instructions) Empl	loyer (See Instructions)
Date	Full name of contributor) Amount of contribution (\$)
02/01/2019	Gail Fischer	5000.00
02/01/2019	Contributor address; City; State; Zip Co- 5100 Park Lane Dallas, TX 7522	de
Principal occup	eation / Job title (See Instructions) Empl	loyer (See Instructions)
	-	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 38 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
02/01/2019	Bennett Glazer		2500.00
	6 Contributor address; City; State;	Zip Code	
	P.O. Box 809013 Dallas, '	TX 75380	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/01/2019	Glenn Solomon		1000.00
	Contributor address; City; State;	Zip Code	
	P.O. Box 190429 Dallas,	TX 75219	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/02/2019	Peggy Carr		100.00
	Contributor address; City; State; 4824 Shadwood Lane Dallas,	Zip Code TX 75209	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/03/2019	Nancy O'Neil		100.00
	Contributor address; City; State; 4808 Byron Avenue Dallas,		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1 39 of 99			
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor uut-of-state PAC ((ID#:)	7 Amount of contribution (\$)
02/04/2019	Shannon Callewart		100.00
	6 Contributor address; City; State;	Zip Code	
	6250 Rex Drive Dallas, 7	TX 75230	
0 5: : :	(11 (2)		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
02/04/2019	Carter Montgomery		500.00
02/04/2017	Contributor address; City; State;		300.00
		TX 75209	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
02/05/2010	Lyria Howland	,	
02/05/2019			100.00
	Contributor address; City; State;	·	
	7421 Winterwood Lane Dallas, 7	TX 75248	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor		
	Sandra Rouse	(ID#:)	Amount of contribution (\$)
02/05/2019			5000.00
		Zip Code	
	3319 Cornell Avenue Dallas, 7	TX 75205	
Principal occur	pation / Job title (See Instructions)	Employer (See Instructi	ions)
i ilicipai occup	ation / bob title (occ mandetions)	Employer (occ matructi	10113)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 40 of 99
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee	
4 Date	5 Full name of contributor	7 Amount of contribution (\$)
02/05/2019	Thomas Rouse	5000.00
02/03/2019	6 Contributor address; City; State; Zip Coc	
	3319 Cornell Avenue Dallas, TX 75205	5
8 Principal occu	pation / Job title (See Instructions) 9 Emplo	oyer (See Instructions)
• · · · · · · · · · · · · · · · · · · ·	3 2	yo. (coo medicaline)
Date	Full name of contributor	Amount of contribution (\$)
	Ann Stuart	Amount of contribution (ψ)
02/05/2019		5000.00
	Contributor address; City; State; Zip Coo 3701 Turtle Creek Blvd Suite 3J Dallas, TX 75219	
	3701 Turtle Creek Blvd Suite 33 Dailas, 17/3219	,
Principal occup	pation / Job title (See Instructions) Emplo	yer (See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
02/06/2019	Leland Burk	5000.00
02/00/2019	Contributor address; City; State; Zip Cod	
	8215 Westchester Suite 207 Dallas, TX 75225	
Principal occup	pation / Job title (See Instructions) Emplo	yer (See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
02/06/2019	Ann Hobson	5000.00
	Contributor address; City; State; Zip Cod	
	4237 Armstrong Parkway Dallas, TX 75205	
Principal occup	pation / Job title (See Instructions) Emplo	yer (See Instructions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 41 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	ee		
4 Date	5 Full name of contributor ut-of-state PAC	; (ID#:)	7 Amount of contribution (\$)
02/07/2019	Mary Bowman Campbell		1000.00
	6 Contributor address; City; State	; Zip Code	
	4411 Cobblers Lane Dallas,	TX 75287	
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 (\$)
02/07/2019	G Todd Bright		1000.00
02/07/2019	Contributor address; City; State		1000.00
	5944 Luther Ln Suite 600 Dallas,	TX 75225	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	: (ID#:)	Amount of contribution (\$)
02/07/2019	Lou Cagle		100.00
	Contributor address; City; State 7905 Glen Albens Cir Dallas,	; Zip Code TX 75225	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	; (ID#:)	Amount of contribution (\$)
02/07/2019	Mary Elizabeth Canon		35.00
	Contributor address; City; State 5722 Farquhar Ln Dallas,		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: 42 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	ee		
4 Date		ID#:)	7 Amount of contribution (\$)
02/07/2019	Bob Carrozza		2500.00
02/01/2019	6 Contributor address; City; State;	Zip Code	2500.00
	3424 Marquette Street Dallas, T	ΓX 75225	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/07/2019	Tom Moore Dees III		1000.00
02/07/2019	Contributor address; City; State;	Zip Code	1000.00
		ΓX 75209	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/07/2019	Leslie Diers		250.00
02/01/2019	Contributor address; City; State;	Zin Code	230.00
		ΓX 75230	
	,		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/07/2019	Sandra Estess	,	250.00
02/07/2017			230.00
		Zip Code FX 75220	
	3313 Bouti Bentwood Bilve Buntas, 1	111 73220	
Principal occur	pation / Job title (See Instructions)	Employer (See Instructi	ions)
	,	p : , : (: - : - : - : - : - : - : - : -	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 43 of 99
2 FILER NAME Debra Lynn McB			3 Filer ID (Ethics Commission Filers)
4 Date 02/07/2019	Louise Griffeth 6 Contributor address; City; State; 3418 Dartmouth Ave Dallas,	TX 75205	7 Amount of contribution (\$) 1000.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date 02/07/2019	Jeffrey Osborne Contributor address; City; State;	; Zip Code TX 75225	Amount of contribution (\$) 250.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 02/07/2019	Full name of contributor uut-of-state PAC Phin Stubbs Contributor address; City; State; 6565 N. MacArthur Blvd. Suite 225 Dallas,		Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 02/07/2019	Jack Vaughn Jr Contributor address; City; State;		Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 44 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)
02/07/2019	Kay Weeks		100.00
	6 Contributor address; City; State;	Zip Code	
	5935 Lupton Dr. Dallas, T	TX 75225	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/07/2019	Lucy Reeves Wrubel		250.00
	Contributor address; City; State;	Zip Code	
	3419 Dartmouth Ave Dallas, T	TX 75205	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/08/2019	Cara French		100.00
	Contributor address; City; State; 4738 Stanford Dallas, T	Zip Code TX 75209	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/08/2019	Nasiba Hartland-Mackie		5000.00
		Zip Code TX 75202	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
	<u>'</u>		

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SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 45 of 99
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	Bee	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
02/08/2019	Thomas Hartland-Mackie	5000.00
	6 Contributor address; City; State; Zip Code	
	400 S Record St Suite 1600 Dallas, TX 75202	
9 Principal occu	pation / Job title (See Instructions) 9 Employer	(See Instructions)
• Filicipal occu	pation 7 300 title (See instructions)	(See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
02/08/2019	John Payne	100.00
02/00/2017	Contributor address; City; State; Zip Code	100.00
	1225 Lausanne Av Dallas, TX 75208	
Principal occup	pation / Job title (See Instructions) Employer	(See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
02/08/2019	Elizabeth Post	25.00
02/00/2019	Contributor address; City; State; Zip Code	25.00
	4064 Clover Lane Dallas, TX 75220	
Principal occup	Dation / Job title (See Instructions) Employer	(See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
02/10/2019	Margaret Arrington	25.00
02/10/2017	Contributor address; City; State; Zip Code 7010 Northwood Road Dallas, TX 75225	
Principal occup	pation / Job title (See Instructions) Employer	(See Instructions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 46 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date		D#:)	7 Amount of contribution (\$)
02/10/2019	Maria Johnston		25.00
	6 Contributor address; City; State;	Zip Code	
	15250 Prestonwood Blvd Suite 320 Dallas, T	TX 75248	
9 Dringing Lago	action / Joh title (Cae Instructions)	- Franksyar (Can Instructi	iana)
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC (II	D#:)	Amount of contribution (\$)
02/10/2010	Tim Robinson		
02/10/2019		Zip Code	300.00
	Contributor address; City; State;		
	11169 Russwood Circle Dallas, T	X 15229	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
	,	. , ,	,
Date	Full name of contributor ut-of-state PAC (II	D#:)	Amount of contribution (\$)
02/11/2019	Andrew Clancy		500.00
Contributor address; City; State; Zip Code			
	4835 LBJ Freeway Suite 1100 Dallas, T	· .	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
	<u>'</u>		
Date	Full name of contributor out-of-state PAC (II Robert Clark	D#:)	Amount of contribution (\$)
02/11/2019	Robert Clark		15.00
	Contributor address; City; State;		
	4627 N. Central Expwy Dallas, T	TX 75205	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 47 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)
02/11/2019	Richard Gray		250.00
	6 Contributor address; City; State;	Zip Code	
	3131 Maple Dallas, 7	TX 75219	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/11/2019	William Lovell		100.00
	Contributor address; City; State;	Zip Code	
	14527 Meandering Way Dallas, T	ΓX 75254	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/11/2019	Jan Strimple		100.00
	Contributor address; City; State; 600 Kosstre Ct. Irving, T	Zip Code ΓX 75061	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/12/2019	Kristi Francis		250.00
	•	Zip Code ΓX 75230	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 48 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McF	ee		
4 Date	5 Full name of contributor out-of-state PAC (II	D#:)	7 Amount of contribution (\$)
02/12/2019 Enid Robinson		500.00	
02/12/2019	6 Contributor address; City; State; Zip Code		300.00
	1100 Uptown Park Blvd Houston,	, TX 77056	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/12/2019	Rosemary Vaughan		5000.00
	Contributor address; City; State;	Zip Code	
	8 Parliament Place Dallas, T	'X 75225	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/13/2019	Pat Morgan-McEvoy		1000.00
	Contributor address; City; State; 3817 Stratford Dallas, T	•	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/13/2019	Jo Gay Paul		10.00
	Contributor address; City; State; 2820 Larry Drive Dallas, T	Zip Code	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this for	m.	1 Total pages Schedule A1: 49 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	ee		
4 Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7 Amount of contribution (\$)
02/14/2019 James Bass			1000.00
6 Contributor address; City; State; Zip Code			
	2501 N Harwood Street Suite 2400 Dallas, TX	75201	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
·	,		,
Date	Full name of contributor	:)	Amount of contribution (\$)
02/14/2010	Rose Fitzgerald		,
02/14/2019	Contributor address; City; State; Z	Zip Code	4500.00
	1918 Olive Street Suite 3701 Dallas, TX		
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
02/14/2019 W.J. Goodwin 500.00			500.00
	-	Zip Code	
	4302 Overhill Drive Dallas, TX	75205	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state_PAC (ID#:	:)	Amount of contribution (\$)
02/14/2019	Steve Kemble		100.00
	Contributor address; City; State; Z		
	715 N Oak Cliff Blvd Dallas, TX	. 75208	
Principal occur	pation / Job title (See Instructions)	Employer (See Instructi	ions)
		. , ,	,
	-		

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 50 of 99				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McE	ee			
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)	
02/14/2019 David Kleckner			25.00	
	6 Contributor address; City; State;	Zip Code		
	6004 Ainsdale Court Dallas,	TX 75252		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ons)	
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)	
02/15/2019	Gary Akright		50.00	
02, 10, 2019	Contributor address; City; State;	Zip Code		
	6508 Barkwood Lane Dallas, '	TX 75248		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)	
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)	
02/15/2019 Mary Ann Denton 100.00			100.00	
	Contributor address; City; State; 3540 Hanover Dallas,	Zip Code ΓX 75225		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)	
02/15/2019	Margaret Hunt		100.00	
		Zip Code TX 75205		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	form.	1 Total pages Schedule A1: 51 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date		ID#:)	7 Amount of contribution (\$)
02/15/2019	Sharon Richards		1000.00
	6 Contributor address; City; State;	Zip Code	
	9309 Pennisula Drive Dallas, T	ΓX 75218	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
• I Illicipal occu	Sation / DOD title (Gee matructions)	, Employer (See manuch	ons)
Date	Full name of contributor ut-of-state PAC (I	ID#:)	Amount of contribution (\$)
02/15/2010	Manning Shannon		125.00
02/15/2019	Contributor address; City; State;		125.00
	•	ΓX 75205	
	5115 Mickilliey Suite D Danas, 1	IA 13203	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
	<u>_</u>		
Date		ID#:)	Amount of contribution (\$)
02/15/2019	Ann Smith		50.00
	Contributor address; City; State;	Zip Code	
	5850 E Lovers Ln Suite 326 Dallas, T	ΓX 75206	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor		Δ (Φ)
	Deborah Ryan	ID#:)	Amount of contribution (\$)
02/16/2019			100.00
	Contributor address; City; State;		
	4811 Kelsey Dallas, T	ΓX 75229	
Dringing Lagger	otion / Job title (Coe Instructions)	Employer (Cap Instructi	inna)
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	oris)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 52 of 99
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
02/17/2019	Jill Smith	500.00
	6 Contributor address; City; State; Zip Co.	de
	4208 Edmondson Avenue Dallas, TX 7520:	5
O Deinsteller	- Alice / Leb Aide (Constructions)	(Con Instructions)
8 Principal occu	pation / Job title (See Instructions) 9 Emplo	oyer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
	Elizabeth Solender	
02/17/2019		
	Contributor address; City; State; Zip Co	
	5440 Del Roy Drive Dallas, TX 75229	9
Principal occup	ation / Job title (See Instructions) Emplo	oyer (See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
02/17/2019	Carl Westcott	1000.00
Contributor address; City; State; Zip Code		
	3710 Rawlins Street Suite 1350 Dallas, TX 75219	
Principal occup	pation / Job title (See Instructions) Emplo	oyer (See Instructions)
Data		
Date	Full name of contributor out-of-state PAC (ID#: Robert Caverlee	
02/18/2019	ROBERT CAVERICE	100.00
	Contributor address; City; State; Zip Coc	
	9944 Capridge Drive Dallas, TX 7523	8
Principal occup	pation / Job title (See Instructions) Emplo	oyer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 53 of 99				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McE	ee			
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)	
02/18/2019	Nicole Green		20.00	
	6 Contributor address; City; State; Zip	Code		
	7731 Meadow Park Dr Suite 219 Dallas, TX 75	230		
0 Division				
8 Principal occu	pation / Job title (See Instructions) 9 Em	nployer (See Instructi	ions)	
Date	Full name of contributor)	Amount of contribution (\$)	
02/18/2019	Brock Grone		20.00	
02/18/2019	Contributor address; City; State; Zip		30.00	
	2313 Moser Avenue Suite 304 Dallas, TX 75			
	2313 Mosei Avenue Suite 304 Danas, 1A 73	200		
Principal occup	eation / Job title (See Instructions)	nployer (See Instructi	ions)	
Data				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)	
02/18/2019	Sara Martineau		250.00	
Contributor address; City; State; Zip Code				
	7983 Caruth Court Dallas, TX 75	225		
D. C. C. C.				
Principal occup	pation / Job title (See Instructions)	nployer (See Instructi	ions)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)	
02/18/2019	David Martineau		250.00	
02/10/2019	Contributor address; City; State; Zip C	Code	250.00	
	Contributor address; City; State; Zip C 7983 Caruth Court Dallas, TX 75			
Principal occup	pation / Job title (See Instructions)	nployer (See Instructi	ions)	
l .				

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 54 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor ut-of-state PAC (I	(ID#:)	7 Amount of contribution (\$)
02/18/2019	Sally Posey		1000.00
	6 Contributor address; City; State;	Zip Code	
	17427 Club Hill Drive Dallas, T	ΓX 75248	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
6 Fillicipal occu	Sation / Job title (See Instructions)	, Employer (See instructi	ions)
Date	Full name of contributor ut-of-state PAC (I	(ID#:)	Amount of contribution (\$)
02/10/2010	Andrea Cheek		100.00
02/19/2019	Contributor address; City; State;	Zip Code	100.00
	•	ГX 75205	
	5450 I otomac Avenue Danas, 1	1X 73203	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date		(ID#:)	Amount of contribution (\$)
02/19/2019	Layton Humphrey		100.00
Contributor address; City; State; Zip Code			
	P.O. Box 1057 Gainesvi	ille, TX 76241	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/19/2019	Clark Hunt	, io#	1000.00
02/19/2019			1000.00
		Zip Code ΓX 75225	
	5550 Sherry Lane State 1500 Banas, 1	111 13223	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
	, ,		

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 55 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date		(ID#:)	7 Amount of contribution (\$)
02/19/2019	Ronald Johnsey		1000.00
	6 Contributor address; City; State;	Zip Code	
	3539 Falls Road Dallas, 7	TX 75220	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	ons)
Date	Full name of contributor uut-of-state PAC ((ID#:)	Amount of contribution (\$)
02/19/2019	Ann McBee Buell		500.00
02,19,2019	Contributor address; City; State;	Zip Code	300.00
	11241 Russwood Dallas, 7	TX 75229	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor uut-of-state PAC ((ID#:)	Amount of contribution (\$)
02/19/2019	Tommy Roberts		250.00
	Contributor address; City; State; 5552 Nakoma Dallas,	Zip Code TX 75209	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/19/2019	Crayton Webb		250.00
	Contributor address; City; State; 5505 W University Blvd Dallas,		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 56 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McF	See		
4 Date 5 Full name of contributor out-of-state PAC (ID#:) Emily Baldridge 6 Contributor address; City; State; Zip Code		7 Amount of contribution (\$) 1000.00	
	1925 Cedar Springs Suite 303 Dallas, T	X /3201	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 02/20/2019	Full name of contributor Eugene Dawson Jr. Contributor address; City; State; San Anton		Amount of contribution (\$) 2500.00
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 02/20/2019	Sam Dawson Contributor address; City; State;	Zip Code nio, TX 78230	Amount of contribution (\$) 2500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 02/20/2019	Full name of contributor	Zip Code	Amount of contribution (\$) 250.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 57 of 99
		3 Filer ID (Ethics Commission Filers)
ee		
	D#:)	7 Amount of contribution (\$)
Victor Horadam M.D.		250.00
6 Contributor address; City; State;	Zip Code	
6054 Aberdeen Dallas, T	X 75230	
ection / Joh title (See Instructions)	Employer (See Instruction	one)
Jation / Job title (See instructions)	Employer (See Instruction	nis)
Full name of contributor	D#:)	Amount of contribution (\$)
Charles Teichman		1250.00
		1230.00
ation / Job title (See Instructions)	Employer (See Instructio	ons)
Full name of contributor	D#:)	Amount of contribution (\$)
Joanne Teichman		1250.00
Contributor address: City: State:	Zin Code	1230.00
ation / Job title (See Instructions)	Employer (See Instructio	ons)
Full name of contributor out-of-state PAC (II	D#:)	Amount of contribution (\$)
Darlene Cass		5000.00
Contributor address; City; State;		
ation / Job title (See Instructions)	Employer (See Instructio	ons)
	bee 5 Full name of contributor Victor Horadam M.D. 6 Contributor address; 6054 Aberdeen Dallas, Totation / Job title (See Instructions) Full name of contributor Charles Teichman Contributor address; 5435 Meaders Lane Dallas, Totation / Job title (See Instructions) Full name of contributor Joanne Teichman Contributor address; 5435 Meaders Lane Contributor address; 5435 Meaders Lane Dallas, Totation / Job title (See Instructions) Full name of contributor Joanne Teichman Contributor address; 5435 Meaders Lane Dallas, Totation / Job title (See Instructions) Full name of contributor Darlene Cass Contributor address; City; State; City; State; City; State; City; State; City; State; City; State; Contributor address; City; State; City; State; City; State; City; State; City; State; City; State;	Full name of contributor South

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 58 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	ee		
4 Date	5 Full name of contributor out-of-state PAC	; (ID#:)	7 Amount of contribution (\$)
02/21/2019	Jo Denton Tuck		250.00
02/21/2019	6 Contributor address; City; State	230.00	
		TX 75219	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor	; (ID#:)	Amount of contribution (\$)
02/22/2010	Mac Smith		200.00
02/22/2019	Contributor address; City; State	; Zip Code	200.00
	•	TX 75229	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	; (ID#:)	Amount of contribution (\$)
02/24/2019 Julie Bagley			100.00
	Contributor address; City; State 6322 Prestonshire Lane Dallas,	; Zip Code TX 75225	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	: (ID#:)	Amount of contribution (\$)
02/24/2019	Deborah & Jim Nugent	, (1511:	100.00
02/2 1/2019	Contributor address; City; State		100.00
		TX 75244	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 59 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date		(ID#:)	7 Amount of contribution (\$)
02/24/2019	Alisha Sinacola		4500.00
	6 Contributor address; City; State;	; Zip Code	
	3617 Crescent Avenue Dallas,	TX 75205	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/24/2019	Candace Winslow		250.00
	Contributor address; City; State;	; Zip Code	
	7718 Maplecrest Drive Dallas,	TX 75254	
Principal occupation / Job title (See Instructions) Employer (See Instructions)		ons)	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/25/2019	Misty Smathers		2500.00
	Contributor address; City; State; 4201 Arcady Avenue Dallas,	Zip Code TX 75205	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/25/2019	Steven Smathers		2500.00
	Contributor address; City; State; 4201 Arcady Avenue Dallas,		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 60 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
02/25/2019	Ann Stordahl		50.00
	6 Contributor address; City; State	; Zip Code	
	3712 Cragmont Dallas,	TX 75205	
0 Division		• 5 1 (0 1 1 1	•
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	lons)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	Carol Aaron		
02/26/2019		7. 0. 1	3000.00
	Contributor address; City; State		
	9707 Meadowbrook Drive Dallas,	TX 75220	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/26/2019	Judith Gibbs		500.00
Contributor address; City; State; Zip Code			
	-	TX 75225	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full reason of contributes.		
	Full name of contributor ☐ out-of-state PAC Neil Goldberg	(ID#:)	Amount of contribution (\$)
02/26/2019			1000.00
		; Zip Code	
	5530 Palomar Lane Dallas,	TX 75229	
Dringing Lagger	otion / Joh title (Coe Instructions)	Employer (Coo Instruct	iona)
Principal occupation / Job title (See Instructions)		Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 61 of 99	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McB	ee			
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)	
02/26/2019	Bobby Lyle		1000.00	
02, 20, 2019	6 Contributor address; City; State;	Zip Code	1000.00	
	6688 N Central Expressway Suite 16000allas,	-		
	5000 IV Central Expressivaly State Todaditas,	111 73200		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)	
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)	
02/26/2019	Melissa Tonn		300.00	
02/20/2017	Contributor address; City; State;	Zip Code	300.00	
		TX 75205		
	5547 Hayine Avenue Danas,	IN 13203		
Principal occupation / Job title (See Instructions) Employer (See Instructions)		ions)		
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)	
02/26/2019	George Watson		500.00	
Contributor address; City; State; Zip Code 4015 Belt Line Road Suite 200 Addison, TX 75001				
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
02/27/2019	Hal Brierley	,	5000.00	
02/27/2019			3000.00	
		Zip Code TX 75205		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)	
	<u> </u>			

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 62 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
02/27/2019	Bill Esping		2500.00
02/27/2019	6 Contributor address; City; State;	Zip Code	2500.00
	5521 Deloache Avenue Dallas,	TX 75220	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
• Fillicipal occu	valion / 300 title (366 instructions)	9 Employer (See instruct	iions)
Date		(ID#:)	Amount of contribution (\$)
02/27/2019	Heather Esping		2500.00
	Contributor address; City; State;	; Zip Code	
	5521 Deloache Avenue Dallas,	TX 75220	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	Dawn Mickey	(15)"	
230.00			
	Contributor address; City; State; 2300 Wolf Steet Suite 5D Dallas,	Zip Code TX 75201	
	2300 Wolf Steet Suite 3D Dullas,	174 75201	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/28/2019	Tricia Besing	, ,	5000.00
	Contributor address; City; State;	; Zip Code	
		TX 75205	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 63 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
02/28/2019	Kimberly Casey		750.00
	6 Contributor address; City; State;	Zip Code	
	9212 Eddy Cove Austin,	TX 78735	
9 Dringing age	estion / leb title (Cae Instructions)	• Employer (Coo Instruct	iona)
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 (\$)
02/29/2010	Holly Hughes		5000.00
02/28/2019	Contributor address; City; State;	Zin Code	5000.00
		TX 75225	
	1.0. Dox 23103 Danas,	1X 13223	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
_			
Date		(ID#:)	Amount of contribution (\$)
02/28/2019	Joseph Hughes Jr.		5000.00
	Contributor address; City; State;	Zip Code	
	P.O. Box 25163 Dallas,	TX 75225	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/28/2019	Paige Slates	(1511)	300.00
02/20/2017			300.00
	Contributor address; City; State; 3111 Cornell Dallas,	TX 75205	
	2 411.00	111 /6200	
Principal occup	nation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 64 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date 5 Full name of contributor out-of-state PAC (ID#:)			7 Amount of contribution (\$)
02/28/2019	Winnie West		1000.00
6 Contributor address; City; State; Zip Code			
	5910 N Central Expressway Suite 13000allas, T	ГХ 75206	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/01/2019	Michael Fallon		250.00
	Contributor address; City; State;	Zip Code	
	6906 Woodland Drive Dallas, T	TX 75225	
Principal occupation / Job title (See Instructions) Employer (S		Employer (See Instruction	ons)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/01/2019	Floyd Honea II		250.00
Contributor address; City; State; Zip Code 8865 Flint Falls Dallas, TX 75243			
	8865 Flint Falls Dallas, T	IA /3243	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/01/2019	Caren Kline	,	250.00
	Contributor address; City; State; 5807 Deloache Ave Dallas, T		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 65 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date		D#:)	7 Amount of contribution (\$)
03/01/2019	Constance Pearcy		5000.00
6 Contributor address; City; State; Zip Code			
	4009 Gillon Ave Dallas, TX	X 75205	
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/02/2019	Rosemary Enrico		1000.00
03/02/2017	Contributor address; City; State;	I	1000.00
	3831 Turtle Creek Blvd. Suite 23B Dallas, TX	·	
	2021 24110 22011 21/01 24100 202 2411415, 11	.270227	
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of contribution (\$)
03/02/2019	Suzanne Flodin		250.00
Contributor address; City; State; Zip Code			
	8630 Vista View Drive Dallas, TX	· ·	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor)#:)	Amount of contribution (\$)
03/02/2019	LUCILO PENA	,	250.00
03/02/2019		Zip Code S, TX 75201	230.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 66 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	iee		
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/03/2019	Ana Carty		2500.00
	6 Contributor address; City; State;	Zip Code	
	1918 Olive St. Suite 2001 Dallas, 7	TX 75201	
O Deinsteal servi			
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 (\$)
02/02/2010	Donald Carty		
03/03/2019			2500.00
	Contributor address; City; State;		
	1918 Olive St. Suite 2001 Dallas, 7	ΓX 75201	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
			· I
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/03/2019	Leeanne Hunt		2500.00
	Contributor address; City; State;	Zip Code	
	3820 Potomac Dallas, 7	TX 75205	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	415.4	A
	Bruce Hunt	(ID#:)	Amount of contribution (\$)
03/03/2019			2500.00
	Contributor address; City; State;		
	3820 Potomac Dallas, 7	TX 75205	
Principal occur	pation / Job title (See Instructions)	Employer (See Instructi	ione)
i ilicipai occup	ation / oob title (Gee mandelions)	Employer (See manuch	ions

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 67 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	ee		
4 Date		(ID#:)	7 Amount of contribution (\$)
03/04/2019	Janis Coffee		1000.00
	6 Contributor address; City; State;	Zip Code	
	6400 Williams Parkway Dallas, '	TX 75205	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/04/2019	Gretchen Kendrick		500.00
03/04/2019	Contributor address; City; State;	Zip Code	300.00
	3010 Old Ranch Parkway Suite 480 Seal Be	-	
	3010 Old Rahen Larkway Buile 400 Bear Be	uen, en 70740	
Principal occupation / Job title (See Instructions) Employer (See Instructions)		ions)	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/04/2019	Randall Kendrick		500.00
Contributor address; City; State; Zip Code 3010 Old Ranch Parkway Suite 480 Seal Beach, CA 90740			
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/04/2019	Joshua King	,	500.00
03/01/2019			300.00
		Zip Code TX 75208	
	oro rames rive.	171 73200	
Principal occupation / Job title (See Instructions) Employer (See Instructions)			tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 68 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	ee		
4 Date		(ID#:)	7 Amount of contribution (\$)
03/04/2019	Hortenstine Wyszynski	100.00	
	6 Contributor address; City; State;	Zip Code	
	3303 Lee Parkway Suite 500 Dallas,	TX 75219	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/05/2019	Brent Christopher		500.00
03/03/2019		; Zip Code	300.00
	•	TX 75206	
	5410 Merrinae 11ve. Bunas,	174 75200	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/05/2019 James Walker			250.00
Contributor address; City; State; Zip Code			
		1, TX 75019	
	••		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/06/2019	Sue Meyer	,	100.00
03, 00, 2013	Contributor address: City Chate		100.00
	Contributor address; City; State; 4201 Beverly Drive Dallas,	TX 75205	
	,		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 69 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor uut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/06/2019	Lane Seliger	500.00	
	6 Contributor address; City; State;	Zip Code	
	3917 Centenary Ave Dallas,	TX 75225	
9 Dringing Lago	action / lab title (Coe Instructions)	• Employer (Coo Instruct	siana)
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	lions)
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/07/2010	Liz Armstrong		
03/07/2019	Contributor address; City; State;		1982.62
	1900 E. Stallford Ave. Cherry	Hills Village, CO 80113	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date		(ID#:)	Amount of contribution (\$)
03/07/2019	William Armstrong		1982.62
Contributor address; City; State; Zip Code			
	1918 N. Olive Street Suite 1801 Dallas,	TX 75201	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	(ID#-	Amount of contribution (A)
	Tracy Cheatham	(ID#:)	Amount of contribution (\$)
03/07/2019			2500.00
	Contributor address; City; State; 1918 N. Olive Street Suite 2403 Dallas,	Zip Code TX 75201	
	1916 N. Olive Street Suite 2403 Dallas,	1X /3201	
Principal occur	pation / Job title (See Instructions)	Employer (See Instruct	tions)
	,	,p, (,

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SCHEDULE A1

The	Instruction Guide explains how to complete this for	m.	1 Total pages Schedule A1: 70 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McF	ee		
4 Date	5 Full name of contributor out-of-state_PAC (ID#	7 Amount of contribution (\$)	
03/07/2019 Richard Cheatham			2500.00
03/07/2019	6 Contributor address; City; State;	2500.00	
	1918 N. Olive Street Suite 2403 Dallas, TX	75201	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			ions)
Date	Full name of contributor ut-of-state PAC (ID#	:)	Amount of contribution (\$)
03/07/2019	Jack Pratt		1500.00
	Contributor address; City; State;	Zip Code	
	13355 Noel Road Suite 1865 Dallas, TX	75240	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	:)	Amount of contribution (\$)
03/08/2019	Georgina Hartland		5000.00
Contributor address; City; State; Zip Code 2501 N. Harwood Street Suite 2500 Dallas, TX 75201			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	:)	Amount of contribution (\$)
03/09/2019	Roy Hohman		50.00
	Contributor address; City; State; Z 7115 Spanky Branch Dr Dallas, TX	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
	·		

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SCHEDULE A1

The	Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A1: 71 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of contribution (\$)
03/09/2019 Roy Hohman			50.00
	6 Contributor address; City; State; Z		
	7115 Spanky Branch Dr Dallas, TX	75248	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
•	,		
Date	Full name of contributor uut-of-state PAC (ID#:_)	Amount of contribution (\$)
03/09/2019	Elizabeth McHargue		25.00
03/03/2013	Contributor address; City; State; Z	1	23.00
	10763 Villager Road Suite C Dallas, TX		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor)	Amount of contribution (\$)
02/00/2010	Elizabeth Myers		
03/03/2013 100.00			
Contributor address; City; State; Zip Code 4436 Abbott Avenue Dallas, TX 75205			
	4450 Addott Avenue Danas, 1X	13203	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)
5 .	<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:_ Len Vaughn)	Amount of contribution (\$)
03/09/2019	Len vaugin		20.00
	Contributor address; City; State; Zi	p Code	
	2107 Village Way Dallas, TX	75216	
5			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

name of contributor muel Chantilis M.D. htributor address; 12 Belclaire Avenue Job title (See Instructions) name of contributor ara Cooley	out-of-state PAC City; State Dallas,	C (ID#:)	1 Total pages Schedule A1: 72 of 99 3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$) 2500.00
muel Chantilis M.D. atributor address; 12 Belclaire Avenue Job title (See Instructions) name of contributor	City; State Dallas,	e; Zip Code s, TX 75205	7 Amount of contribution (\$) 2500.00
muel Chantilis M.D. atributor address; 12 Belclaire Avenue Job title (See Instructions) name of contributor	City; State Dallas,	e; Zip Code s, TX 75205	2500.00
muel Chantilis M.D. atributor address; 12 Belclaire Avenue Job title (See Instructions) name of contributor	City; State Dallas,	e; Zip Code s, TX 75205	2500.00
name of contributor	Dallas,	s, TX 75205	
12 Belclaire Avenue Job title (See Instructions) name of contributor	Dallas,	s, TX 75205	tions)
Job title (See Instructions) name of contributor			tions)
name of contributor	out-of-state PAC	9 Employer (See Instruc	tions)
	out-of-state PAC		
ara Cooley		C (ID#:)	Amount of contribution (\$)
•			2500.00
Contributor address; City; State; Zip Code			
52 Cochran Chapel	Dallas,	s, TX 75220	
ob title (See Instructions)		Employer (See Instruct	tions)
name of contributor	ut-of-state PAC	C (ID#:)	Amount of contribution (\$)
ather Randall			100.00
tributor address; 33 Woodland Drive	City; State	•	
ob title (See Instructions)		Employer (See Instruct	tions)
- are of contributor			φ (Φ)
mberly Yamanouchi	U001-01-State FAC) (ID#:	Amount of contribution (\$) 5000.00
ntributor address; 20 Colgate Avenue	City; State	e; Zip Code	
ob title (See Instructions)		Employer (See Instruct	tions)
- I	name of contributor ather Randall tributor address; 33 Woodland Drive bb title (See Instructions) name of contributor mberly Yamanouchi tributor address; 20 Colgate Avenue	name of contributor ather Randall tributor address; City; State Dallas. Dob title (See Instructions) name of contributor mberly Yamanouchi tributor address; City; State Dallas.	Deb title (See Instructions) Employer (See Instructions) name of contributor ather Randall tributor address; City; State; Zip Code Dallas, TX 75225 Deb title (See Instructions) Employer (See Instructions) Employer (See Instructions) City; State; Zip Code Dallas, TX 75225 City; State; Zip Code Dallas, TX 75225 City; State; Zip Code Dallas, TX 75225

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 73 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	lee		
4 Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7 Amount of contribution (\$)
03/11/2019	John Dupre		27.00
6 Contributor address; City; State; Zip Code			
	3053 Allister Street Dallas, T.	X 75229	
0 Division	· · · · · · · · · · · · · · · · · · ·		
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (IE	D#:)	Amount of contribution (\$)
02/11/2010	Cindy Feld		
03/11/2019		7:- 0-4-	500.00
	Contributor address; City; State;	Zip Code	
	4400 Bordeaux Avenue Dallas, T.	X /5205	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
-	·		ŕ
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/11/2019	Charlene Howell		250.00
Contributor address; City; State; Zip Code			
5455 La Sierra Lane Suite 516 Dallas, TX 75231			
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
D-1-			
Date	Full name of contributor out-of-state PAC (IE Randall McGehee	D#:)	Amount of contribution (\$)
03/11/2019	Kandan McGenee		100.00
	Contributor address; City; State;	Zip Code	
	4327 Holland Avenue Suite 108 Dallas, T.	X 75219	
Principal occur	pation / Job title (See Instructions)	Employer (See Instruction	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 74 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state_PAC ((ID#:)	7 Amount of contribution (\$)
03/11/2019	George Michael		50.00
	6 Contributor address; City; State;	Zip Code	
	8005 Jericho Court Dallas, 7	TX 75248	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/11/2019	Jennifer Mosle		150.00
	Contributor address; City; State;	Zip Code	
	3704 Marquette Street Dallas, 7	TX 75225	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/12/2019 Sharon Bromberg 1			1000.00
	Contributor address; City; State; 4942 Crooked Lane Dallas,	Zip Code TX 75229	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/12/2019	Charles Corson		1000.00
		Zip Code TX 75225	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 75 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/12/2019	Ion Draghici		200.00
	6 Contributor address; City; State;	Zip Code	
	1216 Parlay Circle Dallas, 7	TX 75211	
0 0 0 0 0 0			•
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/12/2019	Claude Lee III		50.00
	Contributor address; City; State;	Zip Code	
	7130 Baxtershire Drive Dallas, 7	TX 75230	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/12/2019	Gilbert Taylor		50.00
	-	TX 75211	
	1250 IV. Tillely Tivelide Bullas, 1	111 /3211	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/13/2019	Bonner Allen	,,	200.00
03/13/2019			200.00
	Contributor address; City; State; 5847 Palo Pinto Dallas, 7	Zip Code TX 75206	
	5047 I dio I into	11 13200	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
		,, (000	,

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SCHEDULE A1

The	Instruction Guide explains how to complete this form	m.	1 Total pages Schedule A1: 76 of 99
2 FILER NAME Debra Lynn McE			3 Filer ID (Ethics Commission Filers)
4 Date 03/13/2019	5 Full name of contributor □ out-of-state PAC (ID#: Scott Ginsburg 6 Contributor address; City; State; Z 3500 Beverly Dr Dallas, TX	Zip Code	7 Amount of contribution (\$) 5000.00
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instruction	ons)
Date 03/13/2019	Full name of contributor	Zip Code	Amount of contribution (\$) 200.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 03/13/2019	Full name of contributor	·	Amount of contribution (\$) 100.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 03/14/2019	Full name of contributor out-of-state PAC (ID#: D. H. Hunt Contributor address; City; State; Z 2101 Cedar Springs Road Suite 600 Dallas, TX	Zip Code	Amount of contribution (\$) 200.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 77 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC	7 Amount of contribution (\$)	
03/15/2019 Thomas Fagadau			5000.00
	6 Contributor address; City; State	; Zip Code	
	4849 Greenville Avenue Suite 1600 Dallas,		
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			ions)
Date	Full name of contributor	; (ID#:)	Amount of contribution (\$)
03/15/2019	Blake Graves		500.00
	Contributor address; City; State	; Zip Code	
	5431 Richmond Ave Dallas,	TX 75206	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
03/15/2019 Faisal Halum			500.00
00, 10, 201,	Contributor address; City; State; 3503 Springbrook Street Dallas,	; Zip Code TX 75205	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	Amount of contribution (\$)
03/15/2019	Rafael Trujillo	(5000.00
		e; Zip Code nville, TX 75137	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 78 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/15/2019	Michael White	500.00	
	6 Contributor address; City; State;		
	5431 Richmond Ave Dallas, 7	ГХ 75206	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	one)
6 Filicipal occu	Sation / Job title (See Instructions)	g Employer (See instruction	ons)
Date	Full name of contributor uut-of-state PAC ((ID#:)	Amount of contribution (\$)
03/16/2019	Neena Newberry		250.00
03/10/2019	Contributor address; City; State;		230.00
		TX 75287	
	1311 Quan 11010 W Ru	111 / 320 /	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	(10#-	
	Carla Moran	(ID#:)	Amount of contribution (\$)
03/17/2019 Caria Moran 250.00			
Contributor address; City; State; Zip Code			
	4606 17th Street Lubbock	k, TX 79415	
Principal occur	nation / Job title (See Instructions)	Employer (See Instruction	one)
Filicipal occup	ation / Job title (See instructions)	Employer (See instruction	ons)
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
03/18/2019	Holly Huffines		500.00
	Contributor address; City; State;	Zip Code	
		son, TX 75080	
	-		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 79 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC (II	D#:)	7 Amount of contribution (\$)
03/18/2019	Steve Kemble		1000.00
	6 Contributor address; City; State;	Zip Code	
	2206 Marilla St Dallas, T	X 75201	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/18/2019	Dana Kleiman		500.00
	Contributor address; City; State;	Zip Code	
	4414 Pomona Road Dallas, T	X 75209	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/18/2019	David Kleiman		500.00
	Contributor address; City; State; 4414 Pomona Road Dallas, T		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of contribution (\$)
03/18/2019	Bill Payne		5000.00
	Contributor address; City; State; 10643 Bridge Hollow Ct. Dallas, T	Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 80 of 99	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McB	ee			
4 Date	5 Full name of contributor uut-of-state PAC	(ID#:)	7 Amount of contribution (\$)	
03/18/2019 Michael Peterson			100.00	
	6 Contributor address; City; State;	Zip Code		
	7137 Lakehurst Ave. Dallas, 7	TX 75230		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)	
• Filicipal occu	Jation / Job title (See Instructions)	9 Employer (See instructi	ions)	
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)	
03/18/2019	Anna Procaccini		30.00	
03/18/2019	Contributor address; City; State;	Zip Code	30.00	
		TX 75208		
	212 IV. Brighton Bullats,	171 75200		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)	
03/18/2019	Truman Smith		1000.00	
Contributor address; City; State; Zip Code				
		ton, SC 29403		
	15 Tendreton St. Charles	1011, 50 27 103		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
03/18/2019	John Sughrue	(10#)	2500.00	
03/16/2019			2300.00	
		Zip Code TX 75219		
	7.0. Box 191.00 Bands,	111 73219		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this for	rm.	1 Total pages Schedule A1: 81 of 99	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McB	ee			
4 Date	5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of contribution (\$)	
03/19/2019 William Atkinson 6 Contributor address; City; State; Zip Code			2500.00	
			25 00.00	
	3606 Saint Johns Drive Highland	Park, TX 75205		
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			ions)	
Date	Full name of contributor	#:)	Amount of contribution (\$)	
03/19/2019	Gina Betts		500.00	
	Contributor address; City; State;	Zip Code		
	3413 Cornell Avenue Dallas, TX	X 75205		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor ut-of-state PAC (ID	#:)	Amount of contribution (\$)	
03/19/2019	Barbara Daseke		500.00	
Contributor address; City; State; Zip Code 15455 Dallas Parkway Suite 550 Addison, TX 75001				
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor ut-of-state PAC (ID#	#:)	Amount of contribution (\$)	
03/19/2019	Leeca Peeples	,	75.00	
	Contributor address; City; State; 10929 Ridgemeadow Dallas, TX	Zip Code		
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 82 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	iee		
4 Date		D#:)	7 Amount of contribution (\$)
03/19/2019	Deborah Scott		500.00
	6 Contributor address; City; State;	Zip Code	
	4412 Belclaire Dallas, T	TX 75205	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ione)
6 Filicipal occu	Sation / Job title (See Instructions)	Linployer (See Instructi	ons)
Date	Full name of contributor ut-of-state PAC (II	D#:)	Amount of contribution (\$)
02/10/2010	John Scott		500.00
03/19/2019	Contributor address; City; State;	Zip Code	500.00
	4412 Belclaire Dallas, T		
	7712 Belefaire Banas, 1	X 13203	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ions)
Date		D#:)	Amount of contribution (\$)
03/19/2019	Jacquelin Sewell		2500.00
	Contributor address; City; State;	Zip Code	
	3606 Saint Johns Drive Dallas, T	X 75205	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (II	ID#·)	Amount of contribution (\$)
03/19/2019	Deborah Storey)	200.00
03/19/2019			200.00
	Contributor address; City; State; 343 Brightwaters Blvd NE St Petersl	Zip Code sburg, FL 33704	
	3 13 Brightwaters Bive IVE	ourg, TE 33701	
Principal occur	pation / Job title (See Instructions)	Employer (See Instructi	ions)
	,	. , .	,

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SCHEDULE A1

The	Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 83 of 99	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McF	ee			
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)	
Charles Teichman 6 Contributor address; City; State; Zip Code			500.00	
	5435 Meaders Lane Suite 700 Dallas, TX 7	5229		
8 Principal occu	pation / Job title (See Instructions) 9 E	mployer (See Instruction	ons)	
Date	Full name of contributor)	Amount of contribution (\$)	
03/19/2019	Joanne Teichman		500.00	
		o Code		
	5435 Meaders Lane Suite 700 Dallas, TX 7	5229		
Principal occup	ation / Job title (See Instructions)	mployer (See Instruction	ons)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)	
03/20/2019	Mary Anne Cree		2500.00	
Contributor address; City; State; Zip Code 2801 Turtle Creek Blvd Suite 10E Dallas, TX 75219				
Principal occup	pation / Job title (See Instructions)	mployer (See Instruction	ons)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)	
03/20/2019	Bill Custard		500.00	
	Contributor address; City; State; Zip 4600 Greenville Avenue Dallas, TX 7	Code		
Principal occup	pation / Job title (See Instructions)	mployer (See Instruction	ons)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 84 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date		D#:)	7 Amount of contribution (\$)
03/20/2019 Linda Custard			500.00
	6 Contributor address; City; State;		
	4600 Greenville Avenue Dallas, TX	X 75206	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/20/2019	Ann Hallam Contributor address; City; State;	Zip Code	250.00
	5521 Southwestern Blvd. Dallas, T2		
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Employer (See Instruction	ons)
Date		D#:)	Amount of contribution (\$)
03/20/2019	Myra B Hull		250.00
	Contributor address; City; State; 3510 Turtle Creek Blvd Suite 4A Dallas, TX		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of contribution (\$)
03/20/2019	Barbara Lemmon		1500.00
	Contributor address; City; State; 1717 Main Street Suite 5880 Dallas, TX	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
	<u> </u>		

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule 85 of 99				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McE	ee			
4 Date	5 Full name of contributor uut-of-state PAC	(ID#:)	7 Amount of contribution (\$)	
03/20/2019 Pamela Mattingly			500.00	
	6 Contributor address; City; State;	Zip Code		
	5953 Joyce Way Dallas, '	TX 75225		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ione)	
6 Filicipal occu	Janoii / Job title (See Instituctions)	9 Employer (See Instructi	ions)	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)	
02/20/2010	Matt Mattingly		500.00	
03/20/2019	Contributor address; City; State;		500.00	
		TX 75225		
	Danas,	1A 13223		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)	
Date				
Date		(ID#:)	Amount of contribution (\$)	
03/20/2019	Jennie Reeves		500.00	
	Contributor address; City; State;	Zip Code		
	3712 Alice Circle Dallas, 7	TX 75205		
<u> </u>				
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)	
03/20/2019	Stuart Reeves	,	500.00	
03/20/2019	Contributor address; City; State;		200.00	
		Zip Code TX 75205		
	*			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 86 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/20/2019	J.C. Thompson Jr		500.00
	6 Contributor address; City; State;	Zip Code	
	3322 Shorecrest Drive Suite 235 Dallas, T	ГХ 75235	
0 5: : :			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ons)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
02/20/2010	John Tolleson		1000.00
03/20/2019		Zin Codo	1000.00
		ГХ 75205	
	0/0/ numers diem Damas, i	1A 73203	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ions)
Date		(ID#:)	Amount of contribution (\$)
03/20/2019	Melissa Tonn		500.00
	3547 Haynie Avenue Dallas, T	ΓX 75205	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/21/2010	Kelly Bingel	,10#	500.00
03/21/2019			300.00
		Zip Code on, VA 22207	
	Armigio	III, VA 22207	
Principal occur	ation / Job title (See Instructions)	Employer (See Instructi	ions)
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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 87 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McE	ee		
4 Date		(ID#:)	7 Amount of contribution (\$)
03/21/2019	Brian Casey		5000.00
	6 Contributor address; City; State;	; Zip Code	
	9212 Eddy Cove Austin,	TX 78735	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/21/2019	Kimberly Casey		4000.00
	Contributor address; City; State;		
	9212 Eddy Cove Austin,	TX 78735	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/21/2019	Nicholas Even		500.00
	Contributor address; City; State; 4127 Douglas Dallas,	Zip Code TX 75219	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
03/21/2019	JoAnn Horak		4750.00
	Contributor address; City; State; 3912 Miramar Avenue Dallas,		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 88 of 99
2 FILER NAME Debra Lynn McF	ee		3 Filer ID (Ethics Commission Filers)
4 Date 03/21/2019 8 Principal occu	Muffin Lemak 6 Contributor address; City; State;	TX 75205	7 Amount of contribution (\$) 500.00
Date 03/21/2019	Full name of contributor	Zip Code	Amount of contribution (\$) 200.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 03/21/2019	Debbie Roberts Contributor address; City; State;	Zip Code ΓX 75201	Amount of contribution (\$) 100.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 03/21/2019	Brett Robertson Contributor address; City; State;		Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 89 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)
03/22/2019	Jennifer Bridwell		500.00
	6 Contributor address; City; State;	Zip Code	
	1918 Olive St Suite 1501 Dallas, T	TX 75201	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/22/2019	Beth Ewing		1000.00
03/22/2019	Contributor address; City; State;	Zip Code	1000.00
	4215 Belclaire Dallas, T	ΓX 75205	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/22/2019	David Genecov		250.00
	Contributor address; City; State;	Zip Code	
		TX 75225	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/22/2019	Amy and Scott Hofland	,	250.00
00, 22, 2019	Contributor address; City; State;		20000
		ΓX 75214	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruction	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 90 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/23/2019	Anne Conner		500.00
	6 Contributor address; City; State;	; Zip Code	
	7110 Lakewood Blvd Dallas,	TX 75214	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/23/2019	Juan Gonzalez		100.00
03/23/2019	Contributor address; City; State:	: Zip Code	100.00
		TX 75228	
Principal occupation / Job title (See Instructions) Employer (See Instructions)		ions)	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
03/23/2019	Jim Nugent		100.00
	Contributor address; City; State; 4717 Mill Run Rd. Dallas,	Zip Code TX 75244	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	iions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/23/2019	Susan Wolcott	, (250.00
00,20,2013		; Zip Code TX 75225	25500
Principal occupation / Job title (See Instructions) Employer (See Instructions)			
	·		

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 91 of 99				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McE	ee			
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)	
03/24/2019	Margaret Gall		500.00	
6 Contributor address; City; State; Zip Code				
	9247 Moss Haven Drive Dallas,	TX 75231		
O Deinsteal servi	- Air / Jah Aida (Cara Instructions)	• F	:	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	ions)	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)	
	Jane D Howell			
03/24/2019		1	25.00	
	Contributor address; City; State;			
	8342 Southmeadow Circle Dallas,	TX 75231		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
	,	. , ,	,	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
03/24/2019	Anne Hubbard		100.00	
00,2 1,2015	Contributor address; City; State;	Zin Code	100.00	
		TX 75230		
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)	
_	<u>'</u>			
Date	Full name of contributor out-of-state PAC Maria Martineau	(ID#:)	Amount of contribution (\$)	
03/24/2019	Maria Martineau		100.00	
		Zip Code		
	6034 Walnut Hill Circle Dallas,	TX 75230		
Principal occup	eation / Job title (See Instructions)	Employer (See Instruction	ions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 92 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/24/2019 Mary Meier			100.00
	6 Contributor address; City; State;	Zip Code	
	6516 Del Norte Dallas,	TX 75225	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/24/2019	Cindy Moskowitz		150.00
03/21/2019	Contributor address; City; State;	Zip Code	150.00
	5915 Warm Mist Lane Dallas,	TX 75248	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/25/2019	Nancy Briggs		500.00
	Contributor address; City; State; 5600 W. Lovers Lane Dallas,	Zip Code TX 75209	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
03/25/2019	Robbie Briggs		500.00
		Zip Code TX 75209	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 93 of 99	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McB	ee			
4 Date	5 Full name of contributor ut-of-state PAC (I	ID#:)	7 Amount of contribution (\$)	
03/25/2019 Henry Campbell III			200.00	
	6 Contributor address; City; State;	Zip Code		
	4232 Edmondson Avenue Dallas, T	ΓX 75205		
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	ID#:)	Amount of contribution (\$)	
03/25/2019	H. D. Carter		100.00	
	Contributor address; City; State;	Zip Code		
	7360 Lane Park Court Dallas, T	TX 75225		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	ID#:)	Amount of contribution (\$)	
03/25/2019	Christopher Click		250.00	
00, 20, 2019	Contributor address; City; State; Zip Code			
		ГХ 75229		
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of contribution (\$)	
03/25/2019	Margaret Collins		50.00	
Contributor address; City; State; Zip Code 3510 Turtle Creek Blvd Suite 10C Dallas, TX 75219				
Principal occupation / Job title (See Instructions) Employer (See Inst			ions)	

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 94 of 99					
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Debra Lynn McE	ee				
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)		
03/25/2019	Peggy Dear		100.00		
	6 Contributor address; City; State;	Zip Code			
	2838 Park Bridge Ct Dallas, 7	TX 75219			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)		
Date	Full name of contributor uut-of-state PAC ((ID#:)	Amount of contribution (\$)		
03/25/2019	Megan Flanagan		100.00		
	Contributor address; City; State;				
	5614 Southwestern Blvd Dallas, 7	TX 75209			
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ions)		
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)		
03/25/2019	Barbara Foreman		500.00		
	Contributor address; City; State; 3815 Waldorf Circle Dallas, 7	Zip Code TX 75229			
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Employer (See Instructi	ions)		
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)		
03/25/2019	Beth Heckert		50.00		
	Contributor address; City; State; 7927 Caruth Court Dallas,				
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)		

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 95 of 99
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McB	ee		
4 Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7 Amount of contribution (\$)
03/25/2019	Dale Johnson		50.00
	6 Contributor address; City; State;	Zip Code	
	3427 Lovers Lane Dallas, T.	X 75225	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ione)
6 Filicipal occu	Jation / Job title (See instructions)	Employer (See instructi	ons)
Date	Full name of contributor ut-of-state PAC (IE	D#:)	Amount of contribution (\$)
02/25/2010	Kaleta Johnson		
03/25/2019	Contributor address; City; State;		250.00
	2000 Victory Avenue Suite 807 Dallas, T.		
	2000 Victory Avenue Suite 607 Danas, 1.	X 73219	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ions)
_			
Date		D#:)	Amount of contribution (\$)
03/25/2019	Barron U Kidd		500.00
Contributor address; City; State; Zip Code			
	4315 Glenwood Avenue Dallas, T	X 75205	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:	Amount of contribution (\$)
03/25/2019	Luther King	J#)	,
03/23/2019			1000.00
		Zip Code rth, TX 76102	
	301 Commerce Street State 1000 Tolt Wor	tii, 174 70102	
Principal occur	pation / Job title (See Instructions)	Employer (See Instructi	ions)
	,		,

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SCHEDULE A1

2 FILER NAME Debra Lynn McBee 4 Date 5 Full name of contributor out-of-state PAC (ID#:				
Debra Lynn Mc S Full name of contributor	The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 96 of 99
4 Date 5 Full name of contributor				3 Filer ID (Ethics Commission Filers)
Jennifer Klos 250.00	Debra Lynn Mo	Bee		
6 Contributor address; City: State: Zip Code Dallas, TX 75220 8 Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) 150.00 Principal occupation / Job title (See Instructions) Date Full name of contributor Out-of-state PAC (ID#: Amount of contribution (\$) 150.00 Principal occupation / Job title (See Instructions) Date Full name of contributor Out-of-state PAC (ID#: Amount of contribution (\$) 150.00 Date Full name of contributor Out-of-state PAC (ID#: Amount of contribution (\$) 100.00 Date O3/25/2019 John McQuade Out-of-state PAC (ID#: Amount of contribution (\$) 100.00 Date Full name of contributor Out-of-state PAC (ID#: Amount of contribution (\$) 100.00 Date Full name of contributor Out-of-state PAC (ID#: Amount of contribution (\$) 100.00 Date Full name of contributor Out-of-state PAC (ID#: Amount of contribution (\$) 100.00 Date Full name of contributor Out-of-state PAC (ID#: Amount of contribution (\$) 1000.00	4 Date	5 Full name of contributor out-of-state PAC (!	ID#:)	7 Amount of contribution (\$)
6 Contributor address; 4023 Valley Ridge Road Dallas, TX 75220 8 Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) 150.00 Contributor address; City; State; Zip Code 6523 Waffoner Drive Dallas, TX 75230 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) 150.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) 100.00 Contributor address; City; State; Zip Code Dallas, TX 75252 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) 100.00 Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) 100.00 Date O3/25/2019 Amount of contribution out-of-state PAC (ID#: Amount of contribution (\$) 1000.00 Date Contributor address; City; State; Zip Code Dallas, TX 75225	03/25/2019	Jennifer Klos		250.00
B Principal occupation / Job title (See Instructions) Date O3/25/2019 Date O3/25/2019 Full name of contributor Contributor address; 6523 Waffoner Drive Date O3/25/2019 Date O3/25/2019 Date O3/25/2019 Full name of contributor John McQuade Contributor address; 6013 Fallsview Ln Date O3/25/2019 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) 100.00 Amount of contribution (\$) 100.00 Amount of contribution (\$) 100.00 Date O3/25/2019 Full name of contributor John McQuade Contributor address; 6013 Fallsview Ln Date O3/25/2019 Full name of contributor Joe Pacetti Contributor address; P.O. Box 25564 City: State: Zip Code Dallas, TX 75225 Amount of contribution (\$) 1000.00		6 Contributor address; City; State;	Zip Code	250.00
Date 03/25/2019 Mark Kreditor Contributor address; 6523 Waffoner Drive Date 03/25/2019 Principal occupation / Job title (See Instructions) Date 03/25/2019 Date 03/25/2019 Principal occupation / Job title (See Instructions) Date 03/25/2019 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) 100.00 Contributor address; 6013 Fallsview Ln Date 03/25/2019 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) 100.00 City: State: Zip Code Dallas, TX 75252 Principal occupation / Job title (See Instructions) Contributor address: City: State: Zip Code Dallas, TX 75225		4023 Valley Ridge Road Dallas, T	ΓX 75220	
Mark Kreditor Contributor address; City; State; Zip Code 6523 Waffoner Drive Dallas, TX 75230 Principal occupation / Job title (See Instructions) Date 03/25/2019 Full name of contributor John McQuade Contributor address; City; State; Zip Code 6013 Fallsview Ln Dallas, TX 75252 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) 100.00 Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) 100.00 Date 03/25/2019 Full name of contributor Joe Pacetti Contributor address; City; State; Zip Code Dallas, TX 75225	8 Principal occ	upation / Job title (See Instructions)	Employer (See Instructio	ons)
Contributor address; City; State; Zip Code	Date	Full name of contributor	 ID#:)	Amount of contribution (\$)
Contributor address; City; State; Zip Code	03/25/2019			150.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date O3/25/2019 Full name of contributor John McQuade Contributor address; 6013 Fallsview Ln Dallas, TX 75252 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) 100.00 Pacetti O3/25/2019 Full name of contributor Joe Pacetti Contributor address; City; State; Zip Code Dallas, TX 75225 Amount of contribution (\$) 1000.00				
Date 03/25/2019 Full name of contributor		6523 Waffoner Drive Dallas, T	ΓX 75230	
John McQuade Contributor address; 6013 Fallsview Ln Date 03/25/2019 Full name of contributor Joe Pacetti Contributor address; City; State; Zip Code Dallas, TX 75252 Employer (See Instructions) Amount of contribution (\$) Amount of contribution (\$) Contributor address; P.O. Box 25564 Dallas, TX 75225	Principal occu	pation / Job title (See Instructions)	Employer (See Instructio	ins)
John McQuade 100.00 Contributor address; City; State; Zip Code 6013 Fallsview Ln Dallas, TX 75252 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date 03/25/2019 Full name of contributor Joe Pacetti Contributor address; P.O. Box 25564 Dallas, TX 75252 Employer (See Instructions) Amount of contribution (\$) 1000.00	03/25/2019	03/25/2019 John McQuade		
Date 03/25/2019 Full name of contributor Joe Pacetti Contributor address; PAC (ID#:) Joe Pacetti Contributor address; P.O. Box 25564 Dallas, TX 75225 Amount of contribution (\$) Date Date Date Date Date Date Date Dat				
O3/25/2019 Joe Pacetti Contributor address; P.O. Box 25564 City; State; Zip Code P.O. Box 25564 Dallas, TX 75225	Principal occu	ıpation / Job title (See Instructions)	Employer (See Instructio	ons)
O3/25/2019 Joe Pacetti Contributor address; P.O. Box 25564 City; State; Zip Code P.O. Box 25564 Dallas, TX 75225	Date	Full name of contributor	11D#-	Amount of contribution (\$)
Contributor address; City; State; Zip Code P.O. Box 25564 Dallas, TX 75225		Joe Pacetti		· · ·
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State;	Zip Code	
	Principal occi	upation / Job title (See Instructions)	Employer (See Instructio	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 97 of 99				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McB	ee			
4 Date	5 Full name of contributor out-of-state PAC (II	ID#:)	7 Amount of contribution (\$)	
03/25/2019	Sally Posey		1000.00	
	6 Contributor address; City; State;	Zip Code		
	17427 Club Hill Drive Dallas, T	CX 75248		
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ione)	
6 Fillicipal occu	Janoii / Job tille (See Instructions)	, Employer (See instructi	ons)	
Date	Full name of contributor ut-of-state PAC (II	ID#:)	Amount of contribution (\$)	
02/25/2010	Billie Rippey		1000.00	
03/25/2019		Zip Code	1000.00	
	4332 Beverly Drive Dallas, T	-		
	+332 Develly Drive Danas, 1	.X 13203		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)	
Date		ID#:)	Amount of contribution (\$)	
03/25/2019	Cindy Ryan		25.00	
Contributor address; City; State; Zip Code				
	10230 Vinemont Dallas, T	CX 75218		
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ons)	
Date	Full name of contributor	ID#·	Amount of contribution (\$)	
03/25/2019	Chuck Steelman	D#	500.00	
03/23/2019			300.00	
	Contributor address; City; State; 3210 Carlisle Street Suite 39 Dallas, T			
	5210 Carrisic Succe Suite 57 Danas, 1	A 13204		
Principal occur	nation / Job title (See Instructions)	Employer (See Instructi	ions)	
	,	17 - (,	

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 98 of 99				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Debra Lynn McE	ee			
4 Date	5 Full name of contributor uut-of-state PAC	(ID#:)	7 Amount of contribution (\$)	
03/25/2019	Robert Vial		200.00	
	6 Contributor address; City; State;	Zip Code		
	10623 Sandpiper Ln Dallas,	TX 75230		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)	
02/16/2019	Nancy Shutt		100.00	
02/10/2019	Contributor address; City; State;	; Zip Code	100.00	
		TX 75220		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
02/18/2019 Toni Wirth 100.00			100.00	
	Contributor address; City; State; 12016 Excelsior Way Dallas,	Zip Code TX 75230		
Principal occupation / Job title (See Instructions) Employer (See Ins		Employer (See Instructi	ions)	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)	
01/27/2019	Susan Wilson		500.00	
		Zip Code TX 75209		
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 99 of 99	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Debra Lynn McF	ee		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
01/31/2019	Connie Carreker		5000.00
01/31/2019	6 Contributor address; City; State;	Zip Code	3000.00
	4321 Overhill Drive Dallas,	TX 75205	
• 5			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
		T	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/31/2019	Stanley Graff		500.00
01/31/2019	Contributor address; City; State;	Zip Code	300.00
		TX 75247	
	·		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/09/2019	Rusty Duvall		
03/09/2019			500.00
	Contributor address; City; State; 3601 Maplewood Avenue Dallas,	Zip Code TX 75205	
	Soot Maple wood Tivenue Sumus,	111 73203	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full reason of contributors		
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
	Contributor address; City; State;	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

1 Total pages Schedule A2: 1 of 2
3 Filer ID (Ethics Commission Filers)
ONS \$
8 Amount of description description 3017.38 Food and beverage for campaign event Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See Instructions)
Contributor's job title (FOR JUDICIAL) (See Instructions)
Law firm of contributor's spouse (if any) (FOR JUDICIAL)
Amount of In-kind contribution description 3017.38. Food and beverages for campaign event Check if travel outside of Texas. Complete Schedule T.
Employer (FOR NON-JUDICIAL) (See Instructions)
Contributor's job title (FOR JUDICIAL) (See Instructions)
Law firm of contributor's spouse (if any) (FOR JUDICIAL)
SCHEDULE AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A2: 2 of 2
2 FILER NAME Debra Lynn McBee	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTION	NS \$
5 Date 6 Full name of contributor □ out-of-state PAC (ID#: 01/15/2019 Hudson Weichsel 7 Contributor address; City; State; Zip Code 5439 Neola Drive Dallas, TX 75209	8 Amount of Gontribution \$ In-kind contribution description 1124.07 Food and beverages for campaign event Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) 11 En	nployer (FOR NON-JUDICIAL) (See Instructions)
12 Contributor's principal occupation (FOR JUDICIAL) 13 Co	entributor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL) 15 La	w firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	
Date Full name of contributor out-of-state PAC (ID#:	Amount of In-kind contribution description 1124.07. Food and beverages for campaign event Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	nployer (FOR NON-JUDICIAL)(See Instructions)
Contributor's principal occupation (FOR JUDICIAL)	ontributor's job title (FOR JUDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)	w firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	
ATTACH ADDITIONAL COPIES OF THIS SCI	HEDULE AS NEEDED

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS SCHEDULE E 1 Total pages Schedule E: The Instruction Guide explains how to complete this form. 1 of 1 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Debra Lynn McBee 0 4 TOTAL OF UNITEMIZED LOANS \$ 9 Loan Amount (\$) Date of loan Name of lender out-of-state PAC (ID#:__ 03/25/2019 Debra Lynn McBee 350000.00 10 Interest rate Is lender 8 Lender address; City; State; Zip Code a financial 0.% Institution? 2120 Olive Street Suite 706 Dallas, TX 75201 11 Maturity date Q 12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) 14 Description of Collateral 15 Check if personal funds were deposited into political account (See Instructions) $|\mathbf{X}|$ none **16** GUARANTOR 17 Name of guarantor 19 Amount Guaranteed (\$) INFORMATION 0.00 18 Guarantor address; City; State; Zip Code not applicable 20 Principal Occupation (See Instructions) 21 Employer (See Instructions) Date of loan Loan Amount (\$) Name of lender out-of-state PAC (ID#:_ Interest rate City; Zip Code Is lender Lender address: State: a financial Institution? Maturity date Ν Principal occupation / Job title (See Instructions) Employer (See Instructions) Description of Collateral Check if personal funds were deposited into political account (See Instructions) none Amount Guaranteed (\$)

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Employer (See Instructions)

State; Zip Code

Principal Occupation (See Instructions)

Name of guarantor

Guarantor address;

GUARANTOR

INFORMATION

not applicable

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

City;

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 1 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 01/08/2019	5 Payee name Linda Williams		
6 Amount (\$) 5193.22	7 Payee address; City; State; Zip Code 1730 MLK Jr. Drive Paris, TX 75460		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/08/2019	Payee name Linda Williams		
Amount (\$) 63.22	Payee address; City; State; Zip Code 1730 MLK Jr. Drive Paris, TX 75460		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Check if Austin	ntside of Texas. Complete Schedule T. TX, officeholder living expense ting campaign materials
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/09/2019	Payee name U.S. Post Office		
Amount (\$) 67.00	Payee address; City; State; Zip Code 2825 Oak Lawn Ave. Dallas, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		utside of Texas. Complete Schedule T. 1, TX, officeholder living expense 1 fees
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees 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: 2 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)	
4 Date 01/10/2019	5 Payee name Oak Highlands Brewery			
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code 10484 Brockwood Road Dallas, TX 75238			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	Check if Austin		
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name H	Office sought	Office held	
Date 01/11/2019	Payee name Allyn Media			
Amount (\$) 17941.19	Payee address; City; State; Zip Code 3838 Oak Lawn Ave. SuiDall06, TX 75219			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Outdoor Advertising creative, printing and placement		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date 01/11/2019	Payee name Allyn Media			
Amount (\$) 5000.00	Payee address; City; State; Zip Code 3838 Oak Lawn Ave. SuiDail00, TX 75219			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		ntside of Texas. Complete Schedule T.	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED	

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees 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 c	omplete this form.	
1 Total pages Schedule F1: 3 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 01/11/2019	5 Payee name Allyn Media		
6 Amount (\$) 5000.00	7 Payee address; City; State; Zip Code 3838 Oak Lawn Ave. Suiliballab, TX 75219		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Ol	Candidate / Officeholder name H	Office sought	Office held
Date 01/11/2019	Payee name Google		
Amount (\$) 30.00	Payee address; City; State; Zip Code 1600 Amphitheatre PkwyMountain View, CA 94043		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		ntside of Texas. Complete Schedule T. TX, officeholder living expense email
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/15/2019	Payee name Office Depot		
Amount (\$) 16.21	Payee address; City; State; Zip Code 2929 Oak Lawn Ave. Dallas, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense aign
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 4 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 01/17/2019	5 Payee name Allyn Media		
6 Amount (\$) 12813.38	7 Payee address; City; State; Zip Code 3838 Oak Lawn Ave. SuiDalla, TX 75219		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Check if Austin	utside of Texas. Complete Schedule T. n, TX, officeholder living expense creative, printing and
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/17/2019	Payee name Asian Mint		
Amount (\$) 39.72	Payee address; City; State; Zip Code 4246 Oak Lawn Ave. Dallas, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Check if Austin,	tside of Texas. Complete Schedule T. , TX, officeholder living expense ndidate during campaign meeting
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/18/2019	Payee name Communities Foundation of Texas		
Amount (\$) 90.00	Payee address; City; State; Zip Code 5500 Caruth Haven Ln Dallas, TX 75225		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense pation fee
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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 (other a dategory not noted above)
1 Total pages Schedule F1: 5 of 30	·		3 Filer ID (Ethics Commission Filers)
4 Date 01/21/2019	5 Payee name Starbucks		
6 Amount (\$) 18.35	7 Payee address; City; State; Zip Code 4101 Lemmon Ave. Dallas, TX 75219		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Check if Austin	utside of Texas. Complete Schedule T. n, TX, officeholder living expense workers during MLK parade
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/21/2019	Payee name Taco Cabana		
Amount (\$) 33.98	Payee address; City; State; Zip Code 3923 Lemmon Ave. Dallas, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Check if Austin	tside of Texas. Complete Schedule T. , TX, officeholder living expense gn workers during MLK parade
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/22/2019	Payee name Allyn Media		
Amount (\$) 249.99	Payee address; City; State; Zip Code 3838 Oak Lawn Ave. SuiDa 406, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		ntside of Texas. Complete Schedule T. r, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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

Candidate/Officeholder/Politica	al Committee Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains I	how to complete this form.	
1 Total pages Schedule F1: 6 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 01/22/2019	5 Payee name Allyn Media		
6 Amount (\$) 19385.14	7 Payee address; City; State; Zip 3838 Oak Lawn Ave. SuiDall06, TX 75219	Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Advertising Expense	Check if travel o	outside of Texas. Complete Schedule T. in, TX, officeholder living expense rinting and delivery
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/25/2019	Payee name The Marketing Collaborative		
Amount (\$) 10000.00	Payee address; City; State; Zip P.O. Box 222139 Dallas, TX 75222	Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sche Consulting Expense	Check if travel or	utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/25/2019	Payee name Kim Locus		
Amount (\$) 4500.00	Payee address; City; State; Zip 9129 Locarno Drive Dallas, TX 75243	Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this school Consulting Expense	Check if travel or	utside of Texas. Complete Schedule T. n, TX, officeholder living expense ttion
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.	
1 Total pages Schedule F1: 7 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 01/28/2019	5 Payee name Oak Highlands Brewery		
6 Amount (\$) 1386.38	7 Payee address; City; State; Zip Code 10484 Brockwood Road Dallas, TX 75238		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	Check if Austin	utside of Texas. Complete Schedule T. n, TX, officeholder living expense rage and event space expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/29/2019	Payee name PCR Election Consulting		
Amount (\$) 288.00	Payee address; City; State; Zip Code 12427 Veronica Circle Farmers Branch, TX 75234		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tiside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/29/2019	Payee name Travis Reynolds		
Amount (\$) 684.00	Payee address; City; State; Zip Code 1103 Valley Vista Drive Grapevine, TX 76051		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T. r, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to c	complete this form.	,
1 Total pages Schedule F1: 8 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 01/30/2019	5 Payee name Allyn Media		
6 Amount (\$) 10000.00	7 Payee address; City; State; Zip Code 3838 Oak Lawn Ave. SuilDall06, TX 75219		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		utside of Texas. Complete Schedule T.
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/30/2019	Payee name GoDaddy		
01/30/2019	GoDaudy		
Amount (\$) 66.48	Payee address; City; State; Zip Code 14455 North Hayden Roald Stuite and OAZ 85260		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		tside of Texas. Complete Schedule T. , TX, officeholder living expense campaign website
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/30/2019	Payee name Google		
Amount (\$) 11.01	Payee address; City; State; Zip Code 1600 Amphitheatre PkwyMountain View, CA 94043		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		tside of Texas. Complete Schedule T. , TX, officeholder living expense email
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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 c	omplete this form.	
1 Total pages Schedule F1: 9 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 01/30/2019	5 Payee name The Campbell Agency		
6 Amount (\$) 480.00	7 Payee address; City; State; Zip Code 3838 Oak Lawn Ave. Suiliba (1908), TX 75219		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense S
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name H	Office sought	Office held
Date 01/31/2019	Payee name FAAAX Couriers		
Amount (\$) 54.80	Payee address; City; State; Zip Code 2353 W. Apollo Road Suffierlands, TX 75044		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		ntside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/01/2019	Payee name Google		
Amount (\$) 18.82	Payee address; City; State; Zip Code 1600 Amphitheatre PkwyMountain View, CA 94043		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		utside of Texas. Complete Schedule T. n, TX, officeholder living expense email
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to a	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 10 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 02/04/2019	5 Payee name The Marketing Collaborative		
6 Amount (\$) 11180.09	7 Payee address; City; State; Zip Code P.O. Box 222139 Dallas, TX 75222		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/04/2019	Payee name Versa Printing, Inc		
Amount (\$) 522.00	Payee address; City; State; Zip Code 2631 Brenner Drive Dallas, TX 75220		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense ting
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/06/2019	Payee name Eco Latino Radio		
Amount (\$) 400.00	Payee address; City; State; Zip Code 12900 Preston Road Dallas, TX 75230		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense c Greet Contribution
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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:	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 02/07/2019	5 Payee name Lake Highlands Junior Womens League		
6 Amount (\$) 5000.00	7 Payee address; City; State; Zip Code P.O. Box 38225 Dallas, TX 75238		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense the Highlands
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held
Date 02/07/2019	Payee name U.S. Post Office		
Amount (\$) 13405.32	Payee address; City; State; Zip Code 2825 Oak Lawn Ave. Dallas, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		ntside of Texas. Complete Schedule T. TX, officeholder living expense mailer
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/08/2019	Payee name Strategies First Technologies, LLC		
Amount (\$) 6356.30	Payee address; City; State; Zip Code 11008 Rosser Road Dallas, TX 75229		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 12 of 30	2 FILER NAME Debra Lynn McBee	3	3 Filer ID (Ethics Commission Filers)
4 Date 02/08/2019	5 Payee name Target	·	
6 Amount (\$) 351.96	7 Payee address; City; State; Zip Code 2417 N Haskell Ave. Dallas, TX 75204		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		de of Texas. Complete Schedule T. FX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/08/2019	Payee name The Marketing Collaborative		
Amount (\$) 2478.00	Payee address; City; State; Zip Code P.O. Box 222139 Dallas, TX 75222		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		de of Texas. Complete Schedule T. X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/09/2019	Payee name Drip Coffee Co.		
Amount (\$) 7.36	Payee address; City; State; Zip Code 3888 Oak Lawn Ave. Dallas, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Check if Austin, T	de of Texas. Complete Schedule T. 'X, officeholder living expense orkers during campaign
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEED	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 13 of 30	2 FILER NAME Debra Lynn McBee	3 Filer ID (Ethics Commission Filers)
4 Date 02/09/2019	5 Payee name Uncle Julios	
6 Amount (\$) 122.48	7 Payee address; City; State; Zip Code 4125 Lemmon Ave. Dallas, TX 75219	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense Working meal for candidate and video crew duing filming
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
02/13/2019	Haystack Burgers and Barley	
Amount (\$) 90.05	Payee address; City; State; Zip Code 3838 Oak Lawn Ave. SuiDallas, TX 75219	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Working meal for campaign workers during campaign meeting
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 02/15/2019	Payee name 3535 Studios	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 3535 Marvin D Love Fwt Dallas, TX 75224	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
EXPENDITURE		Rental space
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 14 of 30	2 FILER NAME Debra Lynn McBee	3 Filer ID (Ethics Commission Filers)
4 Date 02/15/2019	5 Payee name FAAAX Couriers	·
6 Amount (\$) 38.60	7 Payee address; City; State; Zip Code 2353 W. Apollo Road Suffierland, TX 75044	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Courier Fees
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
02/15/2019	The Marketing Collaborative	
Amount (\$) 3240.00	Payee address; City; State; Zip Code P.O. Box 222139 Dallas, TX 75222	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Phone Bank outreach
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date 02/18/2019	Payee name Kim Locus	
Amount (\$) 4500.00	Payee address; City; State; Zip Code 9129 Locarno Drive Dallas, TX 75243	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Grassroots Coordination
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THI	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 15 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 02/18/2019	5 Payee name Linda Williams		
6 Amount (\$) 7140.00	7 Payee address; City; State; Zip Code 1730 MLK Jr. Drive Paris, TX 75460		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/19/2019	Payee name FACEBOOK		
Amount (\$) 89.66	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94205		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		tside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/20/2019	Payee name FedEx		
Amount (\$) 19.42	Payee address; City; State; Zip Code 3905 Oak Lawn Ave. Dallas, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		tside of Texas. Complete Schedule T. , TX, officeholder living expense naterials to voters
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 02/21/2019	5 Payee name Office Depot		
6 Amount (\$) 57.13	7 Payee address; City; State; Zip Code 2929 Oak Lawn Ave. Dallas, TX 75219		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense ign use
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/22/2019	FACEBOOK		
Amount (\$) 10.73	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94205		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense sing
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/22/2019	Payee name The Marketing Collaborative		
Amount (\$) 3240.00	Payee address; City; State; Zip Code P.O. Box 222139 Dallas, TX 75222		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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 c	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 17 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 02/22/2019	5 Payee name Clay Russell		
6 Amount (\$) 282.00	7 Payee address; City; State; Zip Code 12427 Veronica Circle Farmers Branch, TX 75234		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense n and canvassing
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/24/2019	Payee name Mi Cocina		
Amount (\$) 63.80	Payee address; City; State; Zip Code 3699 McKinney Ave. Sulland TX 75104		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Check if Austin,	tside of Texas. Complete Schedule T. , TX, officeholder living expense deo crew during filming
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/25/2019	Payee name FedEx		
Amount (\$) 39.64	Payee address; City; State; Zip Code 3905 Oak Lawn Ave. Dallas, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		tside of Texas. Complete Schedule T. , TX, officeholder living expense naterials to voters
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 18 of 30	2 FILER NAME Debra Lynn McBee	3 Filer ID (Ethics Commission Filers)
4 Date 02/25/2019	5 Payee name U.S. Post Office	·
6 Amount (\$) 110.00	7 Payee address; City; State; Zip Code 2825 Oak Lawn Ave. Dallas, TX 75219	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stamps for fundraising letter
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date 02/27/2019	Payee name U.S. Post Office	
Amount (\$) 110.00	Payee address; City; State; Zip Code 2825 Oak Lawn Ave. Dallas, TX 75219	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stamps for fundraising letter
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 02/28/2019	Payee name Allyn Media	
Amount (\$) 10000.00	Payee address; City; State; Zip Code 3838 Oak Lawn Ave. SuilDalflob, TX 75219	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting Fee
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 19 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 02/28/2019	5 Payee name Allyn Media		
6 Amount (\$) 87.12	7 Payee address; City; State; Zip Code 3838 Oak Lawn Ave. SuilDallob, TX 75219		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District		utside of Texas. Complete Schedule T. n, TX, officeholder living expense o shoot
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/28/2019	Payee name Allyn Media		
Amount (\$) 622.57	Payee address; City; State; Zip Code 3838 Oak Lawn Ave. SuiDaillob, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		ntside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/28/2019	Payee name FAAAX Couriers		
Amount (\$) 93.40	Payee address; City; State; Zip Code 2353 W. Apollo Road Suffarland, TX 75044		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		utside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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 30	2 FILER NAME Debra Lynn McBee	3 Filer ID (Ethics Commission Filers)
4 Date 02/28/2019	5 Payee name FACEBOOK	·
6 Amount (\$) 350.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Social media advertising
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date 02/28/2019	Payee name Office Depot	
Amount (\$) 138.52	Payee address; City; State; Zip Code 2929 Oak Lawn Ave. Dallas, TX 75219	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Envelopes and letterhead paper for campaign use
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 02/28/2019	Payee name The Marketing Collaborative	
Amount (\$) 10549.90	Payee address; City; State; Zip Code P.O. Box 222139 Dallas, TX 75222	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Grassroots Outreach
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 21 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 02/28/2019	5 Payee name The Marketing Collaborative		
6 Amount (\$) 5240.00	7 Payee address; City; State; Zip Code P.O. Box 222139 Dallas, TX 75222		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/28/2019	Payee name U.S. Post Office		
Amount (\$) 330.00	Payee address; City; State; Zip Code 2825 Oak Lawn Ave. Dallas, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense Otes
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/01/2019	Payee name Google		
Amount (\$) 69.67	Payee address; City; State; Zip Code 1600 Amphitheatre PkwyMountain View, CA 94043		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		tside of Texas. Complete Schedule T. , TX, officeholder living expense email
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 22 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 03/03/2019	5 Payee name Allyn Media		
6 Amount (\$) 558.95	7 Payee address; City; State; Zip Code 3838 Oak Lawn Ave. SuilDall06, TX 75219		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense otecards
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/03/2019	Payee name Allyn Media		
Amount (\$) 28968.09	Payee address; City; State; Zip Code 3838 Oak Lawn Ave. Suilia 1406, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Check if Austin	ntside of Texas. Complete Schedule T. TX, officeholder living expense mail shop for campaign mailer
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/04/2019	Payee name Allyn Media		
Amount (\$) 10600.00	Payee address; City; State; Zip Code 3838 Oak Lawn Ave. SuiDall 06, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 23 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 03/08/2019	5 Payee name 3535 Studios		
6 Amount (\$) 1000.00	7 Payee address; City; State; Zip Code 3535 Marvin D Love Fw Dallas, TX 75224		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/08/2019	Payee name The Marketing Collaborative		
Amount (\$) 2934.00	Payee address; City; State; Zip Code P.O. Box 222139 Dallas, TX 75222		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/08/2019	Payee name The Marketing Collaborative		
Amount (\$) 3216.00	Payee address; City; State; Zip Code P.O. Box 222139 Dallas, TX 75222		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 24 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 03/08/2019	5 Payee name John Owen Lovell		
6 Amount (\$) 570.00	7 Payee address; City; State; Zip Code 6537 LBJ Freeway Dallas, TX 75240		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/09/2019	Payee name Starbucks		
Amount (\$) 107.95	Payee address; City; State; Zip Code 4101 Lemmon Ave. Dallas, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Check if Austin	utside of Texas. Complete Schedule T. n, TX, officeholder living expense workers during campaign
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/11/2019	Payee name The Marketing Collaborative		
Amount (\$) 5000.00	Payee address; City; State; Zip Code P.O. Box 222139 Dallas, TX 75222		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

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.	earer (errier a category rist notes above)
1 Total pages Schedule F1: 25 of 30	·	·	3 Filer ID (Ethics Commission Filers)
4 Date 03/12/2019	5 Payee name Kim Locus		
6 Amount (\$) 4500.00	7 Payee address; City; State; Zip Code 9129 Locarno Drive Dallas, TX 75243		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense tion
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/12/2019	Payee name John Owen Lovell		
Amount (\$) 502.50	Payee address; City; State; Zip Code 6537 LBJ Freeway Dallas, TX 75240		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/13/2019	Payee name VoterTrove		
Amount (\$) 1072.58	Payee address; City; State; Zip Code 701 Brazos Street Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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 F 26 of 30	F1: 2 FILER NAME Debra Lynn McBee	3 Filer ID (Ethics Commission Filers)
4 Date 03/14/2019	5 Payee name Alexandra Ventures, LLC	,
6 Amount (\$) 6500.00	7 Payee address; City; State; Zip Code 1050 Lake Carolyn PkwylıSviinte, 4732.775039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting Fee
9 Complete ONLY if direct expenditure to benefit C		Office sought Office held
Date 03/14/2019	Payee name Prep Sportswear	
Amount (\$) 27.17	Payee address; City; State; Zip Code 2211 Elliott Avenue Suit Scattle, WA 98121	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense School t-shirt for WT White event
Complete ONLY if direct expenditure to benefit Co	Candidate / Officeholder name /OH	Office sought Office held
Date 03/15/2019	Payee name The Marketing Collaborative	
Amount (\$) 2934.00	Payee address; City; State; Zip Code P.O. Box 222139 Dallas, TX 75222	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Phone Bank outreach
Complete ONLY if direct expenditure to benefit Co		Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 27 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 03/15/2019	5 Payee name U.S. Post Office		
6 Amount (\$) 14963.18	7 Payee address; City; State; Zip Code 2825 Oak Lawn Ave. Dallas, TX 75219		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense n mailer
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/15/2019	Payee name Vanguard Field Strategies LLC		
Amount (\$) 7700.00	Payee address; City; State; Zip Code 1251 NW Briarcliff Pkw Kansas City, MO 64116		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense a and canvassing
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/18/2019	Payee name Constant Contact		
Amount (\$) 207.87	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		tside of Texas. Complete Schedule T. , TX, officeholder living expense ice
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to (complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 28 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)
4 Date 03/18/2019	5 Payee name U.S. Post Office		
6 Amount (\$) 165.00	7 Payee address; City; State; Zip Code 2825 Oak Lawn Ave. Dallas, TX 75219		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/19/2019	Payee name John Owen Lovell		
Amount (\$) 468.75	Payee address; City; State; Zip Code 6537 LBJ Freeway Dallas, TX 75240		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign work	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/19/2019	Payee name Debra Meek		
Amount (\$) 592.50	Payee address; City; State; Zip Code 1404 Straus Road Cedar Hill, TX 75104		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.			
1 Total pages Schedule F1: 29 of 30	2 FILER NAME Debra Lynn McBee		3 Filer ID (Ethics Commission Filers)		
4 Date 03/21/2019	5 Payee name U.S. Post Office				
6 Amount (\$) 12867.55	7 Payee address; City; State; Zip Code 2825 Oak Lawn Ave. Dallas, TX 75219				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense n mailer		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date 03/25/2019	Payee name Paypal				
Amount (\$) 4869.59	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online merchant fees			
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
Date 02/21/2019	Payee name Zoes Kitchen				
Amount (\$) 32.43	Payee address; City; State; Zip Code 3878 Oak Lawn Avenue Daita \$28X 75219				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Working meal for campaign workers			
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

SCHEDULE F1

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 (other a dategory not noted above)		
1 Total pages Schedule F1: 30 of 30	2 FILER NAME Debra Lynn McBee	·	3 Filer ID (Ethics Commission Filers)		
4 Date 03/15/2019	5 Payee name FAAAX Couriers				
6 Amount (\$) 101.00	7 Payee address; City; State; Zip Code 2353 W. Apollo Road SulDellakt)4TX 75044				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		utside of Texas. Complete Schedule T. n, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date 03/03/2019	Payee name FAAAX Couriers				
Amount (\$) 770.00	Payee address; City; State; Zip Code 2353 W. Apollo Road Sulibellak 94TX 75044				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Courier Fees			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 01/25/2019	Payee name City of Dallas Lot 101				
Amount (\$) 10.00	Payee address; City; State; Zip Code 604 N Harwood St Dallas, TX 75201				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		ntside of Texas. Complete Schedule T. TX, officeholder living expense ampaign event		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					