

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

83

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY		
	Mr	Chad				
NICKNAME	LAST	SUFFIX				
	West					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			Date Received		
	3606 S Tyler Street Apt/Suite: W Dallas TX 75224					
<input type="checkbox"/> Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		Date Hand-delivered or Date Postmarked	
	(214)	509 7555				
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #		Amount \$
	Mr	Benny		Date Processed		
	NICKNAME	LAST	SUFFIX	Date Imaged		
		Guzman				
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE					
	306 S Montreal Ave Dallas TX 75208					
(Residence or Business)						
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
	(469)	616 4558				
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)					
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)					
10 PERIOD COVERED	Month	Day	Year	Month	Day	Year
	01	01	2022	THROUGH	06	30
11 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description
	05	06	2023	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)		
	Dallas City Council District 1			Council District 1		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

14 C/OH NAME Mr Chad West	15 Filer ID (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. <i>THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT.</i> CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 120197.86
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 24476.83
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 122776.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

18 AFFIDAVIT		
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. ***ELECTRONICALLY CERTIFIED*** <div style="border-top: 1px solid black; width: 40%; margin: 0 auto; text-align: center;"> Signature of Candidate or Officeholder </div>		
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said <u>Mr Chad West</u> , this the <u>14th</u> day of <u>July</u> , 20 <u>22</u> , to certify which, witness my hand and seal of office.		
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME

Mr Chad West

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 118,197.90
2.	<input checked="" type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2,000.00
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 24,476.83
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

01/04/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Louis M. Olerio, Jr.

6 Contributor address;

City; State; Zip Code

6310 Lemmon Avenue Suite 202 Dallas, TX 75209

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

01/26/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Blake Martindale

Contributor address;

City; State; Zip Code

9205 S. Oak Cliff Blvd. Dallas, TX 75208

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/22/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Steven Camp

Contributor address;

City; State; Zip Code

611 Kessler Springs Avenue Dallas, TX 75208

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/03/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Austin Schenkel

Contributor address;

City; State; Zip Code

3105 Stanford Avenue Dallas, TX 75225

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
2 of 43**2** FILER NAME

Mr Chad West

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

05/03/2022

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

Craig Schenkel

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

3105 Stanford Avenue

Dallas, TX 75225

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

Date

05/03/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kendall Schenkel

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

3105 Stanford Avenue

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/04/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jarrod Jackson

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

1212 W. Commerce Street

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/05/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bradley Olmstead

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

8741 Aldwick Drive

Dallas, TX 75238

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

05/05/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Moritz

6 Contributor address;

City; State; Zip Code

P.O. Box 490

Arlington, TX 76004

7 Amount of contribution (\$)

949.70

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/05/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Matthew Vrugink

Contributor address;

City; State; Zip Code

6727 Sunnyland Lane

Dallas, TX 75214

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/05/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Wade Johns

Contributor address;

City; State; Zip Code

6964 Westlake Avenue

Dallas, TX 75214

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/06/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Matt Segrest

Contributor address;

City; State; Zip Code

6935 Meadow Lake Avenue

Dallas, TX 75214

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

05/09/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brian Alef

7 Amount of contribution (\$)

200.00

6 Contributor address;

City; State; Zip Code

6756 Inverness Lane

Dallas, TX 75214

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/09/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Rick Perdue

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

7712 Southwestern Blvd.

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/09/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Cavanaugh

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

500 N. Akard Street

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/10/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kim Parker

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

13330 Noel Road

Dallas, TX 75240

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
5 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

05/11/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Howell Beaver

6 Contributor address;

City; State; Zip Code

4232 San Carlos

Dallas, TX 75205

7 Amount of contribution (\$)

949.70

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/11/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James Matt Holley

Contributor address;

City; State; Zip Code

43460 Mockingbird Lane

Dallas, TX 75205

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/11/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Reid Beucler

Contributor address;

City; State; Zip Code

6060 N. Central Expwy.

Dallas, TX 75206

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/11/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Stephen Miller

Contributor address;

City; State; Zip Code

10250 Rosser Rd.

Dallas, TX 75229

Amount of contribution (\$)

189.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
6 of 43**2** FILER NAME

Mr Chad West

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

05/11/2022

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

Warren Andres

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

3710 Rawlins St.

Dallas, TX 75219

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

Date

05/13/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robvert Lamkin

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

14881 Quorum Dr.

Dallas, TX 75254

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/16/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joseph Dingman

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

13223 Glad Acres Dr.

Dallas, TX 75234

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/16/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joseph Pitchford

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

7422 Midbury Dr.

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7 of 43**2** FILER NAME

Mr Chad West

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

05/16/2022

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

Kristian Teleki

7 Amount of contribution (\$)

948.00

6 Contributor address;

City; State; Zip Code

325 Canyon Oaks Dr.

Argyle, TX 76226

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

Date

05/16/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lou Miranda

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

8260 Folcroft Ln.

Dallas, TX 75231

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/17/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Adam Miller

Amount of contribution (\$)

900.00

Contributor address;

City; State; Zip Code

320 W. Main St.

Dallas, TX 75057

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/17/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Barrett Linburg

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

5619 Purdue Ave.

Dallas, TX 75209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8 of 43**2** FILER NAME

Mr Chad West

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

05/17/2022

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

Barry Hancock

7 Amount of contribution (\$)

949.70

6 Contributor address;

City; State; Zip Code

4514 Travis St. Suite 326

Dallas, TX 75205

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

Date

05/17/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carl Anderson

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

2929 Carlisle St. Suite 210

Dallas, TX 75204

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/17/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gary Kaelson

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

501 2nd Ave. Suite B-101

Dallas, TX 75226

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/17/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

J. Mark Wolf

Amount of contribution (\$)

474.70

Contributor address;

City; State; Zip Code

8340 Meadow Rd.

Dallas, TX 75231

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
9 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

05/17/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Margaret Hancock

7 Amount of contribution (\$)

949.70

6 Contributor address;

City; State; Zip Code

3843 Maplewood Ave.

Dallas, TX 75205

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/17/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Scott Rodgers

Amount of contribution (\$)

474.70

Contributor address;

City; State; Zip Code

5918 Lomo Alto

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/17/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Simone Anderson

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

3808 Southwestern Blvd.

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/17/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Valerie Ginsburg

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

2610 Fairmount St.

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
10 of 43**2** FILER NAME

Mr Chad West

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

05/18/2022

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

Diane Cheatham

7 Amount of contribution (\$)

949.70

6 Contributor address;

City; State; Zip Code

P.O. Box 191166

Dallas, TX 75219

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

Date

05/18/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joel Williams

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

4323 Lorraine Ave.

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/18/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Keith Pomykal

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

P.O. Box 192723

Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Alecia Mackey

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

3890 White Clove Ln.

Prosper, TX 75078

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
11 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

05/19/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Austin Schenkel

6 Contributor address;

City; State; Zip Code

3105 Stanford Ave.

Dallas, TX 75225

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Charles OConnell

Contributor address;

City; State; Zip Code

634 Kessler Reserve Court

Dallas, TX 75208

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris Aslam

Contributor address;

City; State; Zip Code

P.O. Box 496539

Garland, TX 75049

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Colton Wright

Contributor address;

City; State; Zip Code

9113 Clearhurst Drive

Dallas, TX 75238

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
12 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

05/19/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Donald Petty

6 Contributor address;

City; State; Zip Code

2808 Fairmount St.

Dallas, TX 75201

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Elizabeth Hurley

Contributor address;

City; State; Zip Code

3910 Gillon Ave.

Dallas, TX 75205

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Frank Mihalopoulos

Contributor address;

City; State; Zip Code

4645 Bishop Avenue Suite 3

Dallas, TX 75205

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jane Weempe

Contributor address;

City; State; Zip Code

1316 W. Canterbury Ct.

Dallas, TX 75208

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
13 of 43**2** FILER NAME

Mr Chad West

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

05/19/2022

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

Jeff Bosse

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

P.O. Box 4378

Dallas, TX 75208

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

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joe McElroy

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1207 Eldorado Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Matthews

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

320 W. Main St.

Lewisville, TX 75057

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Laura Ann Matthews

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

320 W. Main St.

Lewisville, TX 75057

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
14 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

05/19/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Masoln Duperier

6 Contributor address;

City; State; Zip Code

7153 Wildbriar Dr.

Dallas, TX 75214

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Pete Schenkel

Contributor address;

City; State; Zip Code

614 N. Bishop Ave. Suite 3

Dallas, TX 75208

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Philip Crone

Contributor address;

City; State; Zip Code

6518 Trammel Dr.

Dallas, TX 75214

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Philip Wise

Contributor address;

City; State; Zip Code

3444 University Blvd.

Dallas, TX 75205

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
15 of 43**2** FILER NAME

Mr Chad West

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

05/19/2022

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

S.J. Hurley, IV

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

2227 Vantage St.

Dallas, TX 75207

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

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Vanderstraaten

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

4032 Druid Ln.

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Willis Jonnson

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

1001 Belleview St.

Dallas, TX 75215

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gerald Stool

Amount of contribution (\$)

474.70

Contributor address;

City; State; Zip Code

2808 Fairmount St. Suite 100

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
16 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

05/23/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lynne Merlino

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

215 W. Greenbriar Ln.

Dallas, TX 75208

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/25/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Newt Walker

Amount of contribution (\$)

750.00

Contributor address;

City; State; Zip Code

2519 Thomas Ave.

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/01/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brian Bischoff

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

3417 Princeton Ave.

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/01/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kasey Bischoff

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

3417 Princeton Ave.

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
17 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/01/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Paul Wingo

6 Contributor address;

City; State; Zip Code

1227 Woodlawn Ave.

Dallas, TX 75208

7 Amount of contribution (\$)

949.70

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/01/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Roy Gene Evans

Contributor address;

City; State; Zip Code

P.O. Box 26251

Dallas, TX 75225

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/02/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris Culak

Contributor address;

City; State; Zip Code

1223 Kings Hwy.

Dallas, TX 75208

Amount of contribution (\$)

150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/02/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kyle Wick

Contributor address;

City; State; Zip Code

1212 N. Oak Cliff Blvd.

Dallas, TX 75208

Amount of contribution (\$)

332.20

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
18 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/03/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Rebecca Moffett

6 Contributor address;

City; State; Zip Code

934 Stevens Woods Ct.

Dallas, TX 75208

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/05/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Doug Taylor

Contributor address;

City; State; Zip Code

1147 N. Winnetka Ave.

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/06/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Melissa OBrien

Contributor address;

City; State; Zip Code

1524 Junior Dr.

Dallas, TX 75208

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/06/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mike Anglin

Contributor address;

City; State; Zip Code

1414 W. Colorado Blvd.

Dallas, TX 75208

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
19 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/06/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robert Abtahi

6 Contributor address;

City; State; Zip Code

1126 N. Zang

Dallas, TX 75203

7 Amount of contribution (\$)

949.70

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/08/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John McCall, Jr.

Contributor address;

City; State; Zip Code

1650 Oak Knoll St.

Dallas, TX 75208

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/09/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Charles Gearing

Contributor address;

City; State; Zip Code

9332 Mercer Dr.

Dallas, TX 75228

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/09/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jonathan Saxer

Contributor address;

City; State; Zip Code

727 N. Oak Cliff Blvd.

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
20 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/09/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Katherine Homan 2

6 Contributor address;

City; State; Zip Code

1629 Handley Dr.

Dallas, TX 75208

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/10/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chuck Norcross

Contributor address;

City; State; Zip Code

506 Woolsey Dr.

Dallas, TX 75224

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/10/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Melton

Contributor address;

City; State; Zip Code

3804 Immel Dr.

Flower Mound, TX 75022

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/10/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Whitney Marsh

Contributor address;

City; State; Zip Code

1610 Cascade Ave.

Dallas, TX 75224

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
21 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/11/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Diane Sherman

6 Contributor address;

City; State; Zip Code

107 N. Clinton Ave.

Dallas, TX 75208

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/11/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kim Noltemy

Contributor address;

City; State; Zip Code

2301 Flora St.

Dallas, TX 75201

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/11/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Suzanne Buss

Contributor address;

City; State; Zip Code

653 Culpepper Place

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/11/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Zandra Ellis

Contributor address;

City; State; Zip Code

1801 W. 10th St.

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
22 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/12/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Christian Chernock

6 Contributor address;

City; State; Zip Code

1611 Rio Vista Dr.

Dallas, TX 75208

7 Amount of contribution (\$)

949.70

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/12/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Eliseo (Lee) Ruiz

Contributor address;

City; State; Zip Code

214 S. Willomet Ave.

Dallas, TX 75208

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/12/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Harry Cole

Contributor address;

City; State; Zip Code

2803 Mayfair Ln.

McKinney, TX 75071

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/13/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Anne Hagan

Contributor address;

City; State; Zip Code

204 S. Willomet Ave.

Dallas, TX 75208

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
23 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/13/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jake Gilbreath

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

2102 Sharon Ln.

Austin, TX 78703

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/14/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

George Roberts, Jr.

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

309 Monssen Dr

Dallas, TX 75224

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/15/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ben Mackey

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

307 N. Polk St.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/15/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John G. Flaim

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

1900 N. Pearl St. Suite 1500

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
24 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/16/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Preziosi

6 Contributor address;

City; State; Zip Code

2229 Lawndale Dr.

Dallas, TX 75211

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/16/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jakob Andersen

Contributor address;

City; State; Zip Code

903 Stevens Woods Ct.

Dallas, TX 75208

Amount of contribution (\$)

833.33

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/16/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ralph Nasca

Contributor address;

City; State; Zip Code

4713 Clydesdale Dr.

Flower Mound, TX 75028

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/16/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Shane Masterman

Contributor address;

City; State; Zip Code

914 Stevens Woods Ct.

Dallas, TX 75208

Amount of contribution (\$)

833.33

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
25 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/16/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Socorro Herenandez

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

1860 Masters Dr.

Desoto, TX 75115

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/16/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Teresa Rudnicki

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

6909 Tokalon Dr.

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/16/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Thad F. Baker

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

4011 Commerce St.

Dallas, TX 75226

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/16/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Victor Taylor

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

1650 Oak Knoll St.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
26 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/17/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jeff Carey

7 Amount of contribution (\$)

949.70

6 Contributor address;

City; State; Zip Code

300 E. Round Grove Rd. Suite 621 Lewisville, TX 75067

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/17/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Suarez

Amount of contribution (\$)

833.00

Contributor address;

City; State; Zip Code

907 Stevens Woods Ct.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/18/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jay Yancey

Amount of contribution (\$)

237.20

Contributor address;

City; State; Zip Code

850 N. Clinton Ave

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Luther

Amount of contribution (\$)

75.00

Contributor address;

City; State; Zip Code

619 Kessler Spgs. Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
27 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/19/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Elisa Goodwin

6 Contributor address;

City; State; Zip Code

2310 Broken Point

McKinney, TX 75702

7 Amount of contribution (\$)

94.70

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Anne Fay

Contributor address;

City; State; Zip Code

2145 Kessler Ct.

Dallas, TX 75208

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Augustine Jalomo 2

Contributor address;

City; State; Zip Code

607 W. Canty St.

Dallas, TX 75208

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Benjamin Orr

Contributor address;

City; State; Zip Code

518 N. Manus Dr.

Dallas, TX 75222

Amount of contribution (\$)

150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
28 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/20/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bob Stimson

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

2116 Kessler Ct.

Dallas, TX 75208

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Cynthia Drennan

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1655 Kessler Canyon Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Frank Carabeta

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

303 W. Davis St.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James Mathis

Amount of contribution (\$)

249.00

Contributor address;

City; State; Zip Code

2029 W. Colorado Blvd.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
29 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/20/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jerome Garza

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

P.O. Box 223932

Dallas, TX 75222

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joe Whitney

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1652 Sylvan Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Neill

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

3629 Greenbrier Dr.

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jonathon Hetzel

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

7002 Vivian Ave.

Dallas, TX 75223

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
30 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/20/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kellye Raymond

6 Contributor address;

City; State; Zip Code

1001 W. 10th St.

Dallas, TX 75208

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kevin Rachel

Contributor address;

City; State; Zip Code

1642 Kessler Ct.

Dallas, TX 75208

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lawrence Vineyard

Contributor address;

City; State; Zip Code

11436 Strait Ln.

Dallas, TX 75229

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Louis Salcedo

Contributor address;

City; State; Zip Code

3 Richmond Ct.

Mansfield, TX 76063

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
31 of 43**2** FILER NAME

Mr Chad West

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

06/20/2022

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

Marci Phillips

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

1210 N. Winnetka Ave.

Dallas, TX 75208

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

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mark Drennan

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1655 Kessler Canyon Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Matthew Kirk-Tekippe

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

3301 Hudnall St. Suite 6105

Dallas, TX 75235

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Ablon

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

5908 Azalea Ln.

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
32 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/20/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Peter Granoff

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

2207 Kessler Woods Ct.

Dallas, TX 75208

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Stefanie Bradshaw

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

2929 Wycliff Ave.

Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Susan B. Reese

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

2622 Commerce St.

Dallas, TX 75226

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tom Kapioltas

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

2295 Sussex Ln.

Allen, TX 75013

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
33 of 43**2** FILER NAME

Mr Chad West

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

06/20/2022

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

Tim Attlee

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

8751 Collin McKinney Pkwy Suite 1405 McKinney, TX 75070

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

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Veronica Attlee

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

8751 Collin McKinney Pkwy Suite 1405 McKinney, TX 75070

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Zimmerman

Amount of contribution (\$)

47.20

Contributor address;

City; State; Zip Code

105 S. Willomet Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Willis Johnslon

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

1001 Belleview St.

Dallas, TX 75215

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
34 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/21/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dr. Mark Parker

6 Contributor address;

City; State; Zip Code

3606 S. Tyler St. Suite 11A

Dallas, TX 75224

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/21/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Eric Johnson

Contributor address;

City; State; Zip Code

3606 S. Tyler St.

Dallas, TX 75224

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/22/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Nancy Galvan

Contributor address;

City; State; Zip Code

1411 Junior Dr.

Dallas, TX 75208

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/23/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Frank Nucheren

Contributor address;

City; State; Zip Code

4310 Nashwood Ln.

Dallas, TX 75244

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
35 of 43**2** FILER NAME

Mr Chad West

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

06/24/2022

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

Wesley Keyes

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

202 N. Clinton Ave

Dallas, TX 75208

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

Date

06/25/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carl Lutz

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

3724 Waldorf Dr.

Dallas, TX 75229

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/26/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kristene Littlefield

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

3700 Cole Ave. Suite 223

Dallas, TX 75204

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/27/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Venton for Texas

Amount of contribution (\$)

237.20

Contributor address;

City; State; Zip Code

1075 Griffin St. W.

Dallas, TX 75215

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
36 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/27/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Katherine Reese

6 Contributor address;

City; State; Zip Code

5310 Northmoor Dr.

Dallas, TX 75229

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/28/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Anthony Page

Contributor address;

City; State; Zip Code

3210 Carlisle St. Suite 1

Dallas, TX 75204

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/28/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Decarla Anderson

Contributor address;

City; State; Zip Code

2738 Whitewood Dr.

Dallas, TX 75233

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/28/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jennifer Gates

Contributor address;

City; State; Zip Code

4914 Keyhole Ln.

Dallas, TX 75229

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
37 of 43**2** FILER NAME

Mr Chad West

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

06/29/2022

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

Chris Applequist

7 Amount of contribution (\$)

949.70

6 Contributor address;

City; State; Zip Code

9034 Meadowknoll Dr.

Dallas, TX 75243

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

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Andy Wallace

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

4433 Westway Ave.

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Becky Connatser

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

815 W. Greenbriar Ln.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bryan Howell

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

685 Kessler Reserve Ct.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
38 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/30/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Calvert Collins-Bratton

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

4738 Hallmark Dr.

Dallas, TX 75229

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Cam Urano

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

311 N. Edgefield Ave

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chad Dolezal

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

1015 S. Winnetka Ave.

Dallas, TX 75298

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chase Pope

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

6060 N Central Expwy.

Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
39 of 43**2** FILER NAME

Mr Chad West

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

06/30/2022

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

Daniel Huerta

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

1414 Cedar Hill Ave.

Dallas, TX 75208

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

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Daniel (Vinnie) Sherman

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

1743 Elmwood Blvd.

Dallas, TX 75224

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Blewett

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

6228 Vickery Blvd.

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Garrison Neurohr

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

4444 Cole Ave. Suite 319

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
40 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/30/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jeremy Orr

6 Contributor address;

City; State; Zip Code

1033 Cedar Hill Ave.

Dallas, TX 75208

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lisa Taylor

Contributor address;

City; State; Zip Code

923 Salmon Dr.

Dallas, TX 75208

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Marsha Donathan

Contributor address;

City; State; Zip Code

12101 Trinity Blvd.

Euless, TX 76040

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ray Hunt

Contributor address;

City; State; Zip Code

1900 N. Akard St.

Dallas, TX 75201

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
41 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/30/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ryan Holloway

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

4325 Elm St. Suite 200

Dallas, TX 75226

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sam McDonald

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

2630 Shelby Ave.

Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Seth Bame

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

4439 Westway Ave.

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Stephanie Engwall

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

700 N. Oak Cliff Blvd.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
42 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/30/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tre Black

6 Contributor address;

City; State; Zip Code

751 Kessler Lake Dr.

Dallas, TX 75208

7 Amount of contribution (\$)

949.70

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

HBA Greater Dallas HOME PAC

Contributor address;

City; State; Zip Code

5816 W Plano Parkway

Plano, TX 75093

Amount of contribution (\$)

2500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Stonewall Democrats PAC

Contributor address;

City; State; Zip Code

P.O. Box 192305

Dallas, TX 75219

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/16/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

TREPAC

Contributor address;

City; State; Zip Code

P.O. Box 2246

Austin, TX 78768

Amount of contribution (\$)

2500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
43 of 43

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

06/01/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tim Byrne

6 Contributor address;

City; State; Zip Code

2000 McKinney Ave Suite 1000 Dallas, TX 75201

7 Amount of contribution (\$)

5000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/01/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tim Headington

Contributor address;

City; State; Zip Code

1608 Main Street Suite 2 Dallas, TX 75201

Amount of contribution (\$)

5000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Barry Hancock

Contributor address;

City; State; Zip Code

4514 Travis Street Suite 326 Dallas, TX 75205

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Angela Hunt

Contributor address;

City; State; Zip Code

8811 Antrim Drive Dallas, TX 75218

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:
1 of 1

2 FILER NAME
Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date
06/20/2022

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

7 Contributor address; City; State; Zip Code
213 W 8th Street Dallas, TX 75208

8 Amount of Contribution \$ 1000.00
9 In-kind contribution description
Campaign Fundraiser at Taco Y Vino

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law 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
05/19/2022

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

Contributor address; City; State; Zip Code
47 Highland Park Village Dallas, TX 75205

Amount of Contribution \$ 1000.00
In-kind contribution description
Fundraiser expenses

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 01/07/2022	5 Payee name North Texas LGBT	
6 Amount (\$) 430.00	7 Payee address; City; State; Zip Code 4123 Cedar Springs Road Dallas, TX 75219	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Membership	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/10/2022	Candidate / Officeholder name Payee name Dallas Holocaust	
Amount (\$) 30.00	Payee address; City; State; Zip Code 300 N Houston Street Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/12/2022	Candidate / Officeholder name Payee name Tom Thumb	
Amount (\$) 82.23	Payee address; City; State; Zip Code 315 S Hampton Road Dallas, TX 75211	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Lit Assembly
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 36		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 01/18/2022		5 Payee name Act Blue Venton Jones			
6 Amount (\$) 500.00		7 Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Donation		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/18/2022		Payee name The Dallas Assembly			
Amount (\$) 612.85		Payee address; City; State; Zip Code 12900 Preston Road Suite 1110, TX 75230			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Membership		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/19/2022		Payee name Childrens Aquarium			
Amount (\$) 65.00		Payee address; City; State; Zip Code 1462 1st Avenue Dallas, TX 75210			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Membership		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 36		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 01/20/2022		5 Payee name Ben Mackey Campaign			
6 Amount (\$) 500.00		7 Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Donation		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/20/2022		Payee name Chad West			
Amount (\$) 256.80		Payee address; City; State; Zip Code 810 North Bishop Avenue Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/24/2022		Payee name The Dallas Assembly			
Amount (\$) 51.50		Payee address; City; State; Zip Code 12900 Preston Road Suite 1110 Dallas, TX 75230			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 01/24/2022	5 Payee name Oak Cliff Lions Club	
6 Amount (\$) 50.00	7 Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 01/24/2022	Payee name Mailchimp	
Amount (\$) 93.80	Payee address; City; State; Zip Code 675 Ponce de Leon NE Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 01/25/2022	Payee name Act Blue Jane Hamilton	
Amount (\$) 500.00	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 01/27/2022	5 Payee name Katy Seitzler	
6 Amount (\$) 52.50	7 Payee address; City; State; Zip Code 217 Sycamore Creek Road Allen, TX 75002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing, Campaign Communications
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/26/2022	Candidate / Officeholder name Tom Thumb	
Amount (\$) 101.81	Office sought Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Spreadsheet cleanup
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/27/2022	Candidate / Officeholder name TLF MCSHAN Florist	
Amount (\$) 107.17	Office sought Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thank you Flowers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6 of 36		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 01/28/2022		5 Payee name The Dallas Assembly			
6 Amount (\$) 293.55		7 Payee address; City; State; Zip Code 12900 Preston Road Suite 1110, Dallas, TX 75230			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/30/2022		Payee name Chad West			
Amount (\$) 465.00		Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Reimbursement for Nov-Dec	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/31/2022		Payee name Target			
Amount (\$) 156.30		Payee address; City; State; Zip Code 739 N HW 67 Cedar Hill, TX 75104			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Greeting Cards and Supplies for Donors	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 02/07/2022	5 Payee name Dallas Examiner Newspaper	
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code P.O. Box 3720 Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/07/2022	Candidate / Officeholder name Payee name Michaels Stores	Office sought Office held
Amount (\$) 62.30	Payee address; City; State; Zip Code 751 N HW 67 Dallas, TX 75104	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for donor gifts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/07/2022	Candidate / Officeholder name Payee name Go Oak Cliff	Office sought Office held
Amount (\$) 1500.00	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 02/08/2022	5 Payee name Katy Seitzler	
6 Amount (\$) 280.00	7 Payee address; City; State; Zip Code 217 Sycamore Creek Road Allen, TX 75002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing, Campaign Communications
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/10/2022	Candidate / Officeholder name Go Oak Cliff	
Amount (\$) 250.00	Office sought Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/14/2022	Candidate / Officeholder name Amazon Mktp	
Amount (\$) 124.45	Office sought Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailer supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 02/14/2022	5 Payee name North Oak Cliff United Police Patrol	
6 Amount (\$) 365.00	7 Payee address; City; State; Zip Code P.O. Box 226216 Dallas, TX 75222	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Membership	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/22/2022	Candidate / Officeholder name Miami Convention	
Amount (\$) 12.54	Payee address; City; State; Zip Code 1901 Convention Center Miami, FL 33139	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food Expense - Convention Ctr Tour
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/22/2022	Candidate / Officeholder name Sheraton Dallas	
Amount (\$) 31.47	Payee address; City; State; Zip Code 400 Olive Street Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food Expense - Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 10 of 36		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 02/24/2022		5 Payee name Mailchimp			
6 Amount (\$) 104.46		7 Payee address; City; State; Zip Code 675 Ponce de Leon NE Atlanta, GA 30308			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/28/2022		Payee name ABC Party Headquarters			
Amount (\$) 10.81		Payee address; City; State; Zip Code 1414 W Davis Street Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mardi Gras Parade Supplies	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/28/2022		Payee name Tribute Store			
Amount (\$) 142.88		Payee address; City; State; Zip Code 101 Main Street Middleton, WI 42001			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Gifts		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flowers for Memorial	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 02/28/2022	5 Payee name ABC Party Headquarters	
6 Amount (\$) 38.97	7 Payee address; City; State; Zip Code 1414 W Davis Street Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mardi Gras Parade Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/28/2022	Candidate / Officeholder name ABC Party Headquarters	
Amount (\$) 330.00	Payee address; City; State; Zip Code 1414 W Davis Street Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mardi Gras Parade Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/28/2022	Candidate / Officeholder name Chad West	
Amount (\$) 642.54	Payee address; City; State; Zip Code 810 N Bishop Avenue Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals Reimbursement - DC Trip
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 03/07/2022	5 Payee name Qualigraphics, Inc	
6 Amount (\$) 2080.75	7 Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Re-Elect T-Shirts
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/02/2022	Payee name Katy Seitzler	
Amount (\$) 280.00	Payee address; City; State; Zip Code 217 Sycamore Creek Road Allen, TX 75002	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing, Campaign Communications
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/08/2022	Payee name Qualigraphics, Inc	
Amount (\$) 83.89	Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Chad West Re elect Banner
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 13 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 03/08/2022	5 Payee name Tom Thumb	
6 Amount (\$) 67.78	7 Payee address; City; State; Zip Code 315 S Hampton Road Dallas, TX 75211	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for event
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/14/2022	Payee name Marriott Marquis	
Amount (\$) 34.60	Payee address; City; State; Zip Code 901 Massachusetts Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/14/2022	Payee name Another Broken Egg Café	
Amount (\$) 40.91	Payee address; City; State; Zip Code 4111 Charlotte Avenue Nashville, TN 37209	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 14 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 03/14/2022	5 Payee name Polk Vernon Neighborhood Association	
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 1607 South Tyler Street Dallas, TX 75224	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/16/2022	Payee name Go Oak Cliff	
Amount (\$) 250.00	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/18/2022	Payee name Adamson Athletic Booster Club	
Amount (\$) 75.00	Payee address; City; State; Zip Code 309 East 9th Street Dallas, TX 75203	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation for Football Team
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 15 of 36		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/18/2022		5 Payee name Kaitlin Vaderslice			
6 Amount (\$) 184.03		7 Payee address; City; State; Zip Code 707 South Brighton Avenue Dallas, TX 75208			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Copies	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/24/2022		Payee name Mailchimp			
Amount (\$) 104.46		Payee address; City; State; Zip Code 675 Ponce de Leon NE Atlanta, GA 30308			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/24/2022		Payee name Chad West			
Amount (\$) 767.41		Payee address; City; State; Zip Code 810 North Bishop Avenue Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Travel		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel - flights	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 16 of 36		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/28/2022		5 Payee name Viasat In-Flight			
6 Amount (\$) 12.00		7 Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet Expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/30/2022		Payee name Methodist Hospitals of Dallas Guild			
Amount (\$) 100.00		Payee address; City; State; Zip Code 4008 Stanford Avenue Dallas, TX 75225			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/30/2022		Payee name Oak Cliff Chamber of Commerce			
Amount (\$) 350.00		Payee address; City; State; Zip Code 1001 North Bishop Avenue Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 17 of 36		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/30/2022		5 Payee name MAP Communications			
6 Amount (\$) 137.79		7 Payee address; City; State; Zip Code P.O. Box 95117 Chicago, IL 60694			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voicemail Service	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/31/2022		Payee name Heritage Oak Cliff			
Amount (\$) 250.00		Payee address; City; State; Zip Code P.O. Box 4027 Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Donation		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 04/04/2022		Payee name Dallas AFL-CIO			
Amount (\$) 250.00		Payee address; City; State; Zip Code 1408 North Washington Dallas, TX 75204			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Donation		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 04/04/2022	5 Payee name Katy Seitzler	
6 Amount (\$) 210.00	7 Payee address; City; State; Zip Code 217 Sycamore Creek Road Allen, TX 75002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Marketing, campaign communications and social media
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 04/07/2022	Payee name Maria Salazar	
Amount (\$) 472.57	Payee address; City; State; Zip Code 2605 East Ledbetter Drive Dallas, TX 75216	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 04/07/2022	Payee name Erick Mendoza	
Amount (\$) 526.00	Payee address; City; State; Zip Code 9633 County Road 800 Royse City, TX 75189	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 19 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 04/08/2022	5 Payee name Casa de Paz Montessori	
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 719 North Bishop Avenue Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 04/12/2022	Payee name Nova	
Amount (\$) 37.31	Payee address; City; State; Zip Code 1417 W Davis Street Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting with Campaign Volunteer
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 04/14/2022	Payee name TST Electric Shuffle	
Amount (\$) 75.86	Payee address; City; State; Zip Code 2615 Elm Street Dallas, TX 75226	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 20 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 04/15/2022	5 Payee name Benny Guzman	
6 Amount (\$) 200.00	7 Payee address; City; State; Zip Code 306 South Montreal Avenue Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Easter Donation
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 04/15/2022	Payee name MAP Communications	
Amount (\$) 275.02	Payee address; City; State; Zip Code P.O. Box 95117 Chicago, IL 60694	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voicemail Service
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 04/15/2022	Payee name UNICEF	
Amount (\$) 126.00	Payee address; City; State; Zip Code 125 Maiden Lane New York, NY 10038	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 21 of 36		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 04/18/2022		5 Payee name 7-Eleven			
6 Amount (\$) 9.28		7 Payee address; City; State; Zip Code 3020 N Hampton Road Dallas, TX 75208			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 04/19/2022		Payee name Oak Cliff Lions Club			
Amount (\$) 50.00		Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Membership		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 04/20/2022		Payee name TST The Network			
Amount (\$) 116.33		Payee address; City; State; Zip Code 331 Singleton Blvd Dallas, TX 75212			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting with Constituents	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 04/25/2022	5 Payee name TST The Network	
6 Amount (\$) 116.33	7 Payee address; City; State; Zip Code 331 Singleton Blvd Dallas, TX 75212	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting with Constituents
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 04/25/2022	Payee name Mailchimp	
Amount (\$) 104.46	Payee address; City; State; Zip Code 675 Ponce de Leon NE Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 04/28/2022	Payee name Walgreens	
Amount (\$) 151.27	Payee address; City; State; Zip Code 1306 N Beckley Ave Dallas, TX 75203	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 23 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 04/29/2022	5 Payee name Dallas Foundation	
6 Amount (\$) 30.00	7 Payee address; City; State; Zip Code 3000 Pegasus Park Drive Dallas, TX 75247	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 04/29/2022	Payee name Promise House	
Amount (\$) 105.00	Payee address; City; State; Zip Code 224 W Page Avenue Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 04/29/2022	Payee name Chad West	
Amount (\$) 1539.58	Payee address; City; State; Zip Code 810 N Bishop Avenue Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Spring lunch/breakfast meetings
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 24 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 05/02/2022	5 Payee name Fairmount Austin	
6 Amount (\$) 40.64	7 Payee address; City; State; Zip Code 101 Red River Road Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel expense - meeting with Cmsr Cobos
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/05/2022	Payee name SPENA	
Amount (\$) 50.00	Payee address; City; State; Zip Code P.O. Box 225194 Dallas, TX 75222	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Membership	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/10/2022	Payee name Hector P Garcia	
Amount (\$) 100.00	Payee address; City; State; Zip Code 700 East 8th Street Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 25 of 36		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 05/10/2022		5 Payee name Bullzerk			
6 Amount (\$) 305.81		7 Payee address; City; State; Zip Code 920 S Harwood Street Dallas, TX 75201			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gifts		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Decorative cups for City staff- Aspen	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/13/2022		Payee name NTTA			
Amount (\$) 19.14		Payee address; City; State; Zip Code 5555 President George Bush Blvd Dallas, TX 75203			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/13/2022		Payee name Kiers Hope Foundation			
Amount (\$) 250.00		Payee address; City; State; Zip Code P.O. Box 2586 Cedar Hill, TX 75104			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Donation		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 26 of 36		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 05/18/2022		5 Payee name DFW Airport Park			
6 Amount (\$) 162.00		7 Payee address; City; State; Zip Code 2400 Aviation Drive DFW Airport, TX 75261			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Travel		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/19/2022		Payee name Victoria Perez			
Amount (\$) 95.09		Payee address; City; State; Zip Code 808 Rutherford Road Waxhachie, TX 75165			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage and other purchase reimbursements	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/20/2022		Payee name Marina Ruiz			
Amount (\$) 200.00		Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LULAC Membership	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 27 of 36		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 05/20/2022		5 Payee name Express Shop			
6 Amount (\$) 45.40		7 Payee address; City; State; Zip Code 400 Crescent Court Dallas, TX 75219			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gifts		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gift for Donor	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/20/2022		Payee name Creative Isigns			
Amount (\$) 162.38		Payee address; City; State; Zip Code 2650 Lombardy Lane Dallas, TX 75220			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Event Signs	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/23/2022		Payee name Katy Seitzler			
Amount (\$) 350.00		Payee address; City; State; Zip Code 217 Sycamore Creek Road Allen, TX 75002			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Marketing, campaign communications and social media	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 28 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 05/23/2022	5 Payee name Oak Cliff Lions Club	
6 Amount (\$) 50.00	7 Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Membership	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 05/24/2022	Payee name USPS	
Amount (\$) 58.00	Payee address; City; State; Zip Code 104 East Ovilla Road Red Oak, TX 75154	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps for Mailing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 05/24/2022	Payee name Mailchimp	
Amount (\$) 104.46	Payee address; City; State; Zip Code 675 Ponce de Leon NE Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 29 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 05/24/2022	5 Payee name Dirt Flowers	
6 Amount (\$) 159.67	7 Payee address; City; State; Zip Code 417 North Bishop Avenue Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thank you Flowers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 05/24/2022	Payee name Dirt Flowers	
Amount (\$) 175.37	Payee address; City; State; Zip Code 417 North Bishop Avenue Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thank you Flowers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 05/25/2022	Payee name Dirt Flowers	
Amount (\$) 46.01	Payee address; City; State; Zip Code 417 North Bishop Avenue Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thank you Flowers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 30 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 05/26/2022	5 Payee name Viasat In-Flight	
6 Amount (\$) 12.00	7 Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 05/31/2022	Payee name Jax CNBC	
Amount (\$) 7.99	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet Expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 05/31/2022	Payee name Viasat In-Flight	
Amount (\$) 12.00	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet Expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 31 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 05/31/2022	5 Payee name Promise House	
6 Amount (\$) 1000.00	7 Payee address; City; State; Zip Code 224 W Page Avenue Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Promise House Fundraiser
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/03/2022	Candidate / Officeholder name Katy Seitzler	
Amount (\$) 332.50	Office sought Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Marketing, campaign communications and social media
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/03/2022	Candidate / Officeholder name 1010 Partnership LLC	
Amount (\$) 135.87	Office sought Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 32 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 06/13/2022	5 Payee name Central Computer & Networks	
6 Amount (\$) 162.38	7 Payee address; City; State; Zip Code P.O. Box 860337 Plano, TX 75086	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Desktop Backup
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/16/2022	Candidate / Officeholder name Payee name DEX Imaging	
Amount (\$) 113.97	Payee address; City; State; Zip Code P.O. Box 17299 Clearwater, FL 33762	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Copier, Printer
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/16/2022	Candidate / Officeholder name Payee name Color Me Empowered	
Amount (\$) 250.00	Payee address; City; State; Zip Code 2101 West Clarendon Dr Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 33 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 06/16/2022	5 Payee name Tyrone Marshall	
6 Amount (\$) 120.00	7 Payee address; City; State; Zip Code 5151 Village Fair Drive Dallas, TX 75224	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/21/2022	Candidate / Officeholder name Tangle Ridge	
Amount (\$) 10.00	Office sought Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/21/2022	Candidate / Officeholder name Finance Committee Camp Wisdom UMC	
Amount (\$) 250.00	Office sought Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 34 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 06/21/2022	5 Payee name Walgreens	
6 Amount (\$) 38.95	7 Payee address; City; State; Zip Code 1306 N Beckley Ave Dallas, TX 75203	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 06/21/2022	Payee name Fast Signs	
Amount (\$) 240.36	Payee address; City; State; Zip Code 6940 Marvin D Love FreDallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs for Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 06/22/2022	Payee name Chad West	
Amount (\$) 350.00	Payee address; City; State; Zip Code 810 North Bishop AvenueDallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 35 of 36	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 06/23/2022	5 Payee name TLF MCSHAN Florist	
6 Amount (\$) 87.69	7 Payee address; City; State; Zip Code 10311 Garland Road Dallas, TX 75218	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Memorial Flowers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/23/2022	Candidate / Officeholder name Payee name TLF MCSHAN Florist	
Amount (\$) 109.34	Payee address; City; State; Zip Code 10311 Garland Road Dallas, TX 75218	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Memorial Flowers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/24/2022	Candidate / Officeholder name Payee name Golazo	
Amount (\$) 200.00	Payee address; City; State; Zip Code 3430 Holiday Road Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 36 of 36		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 06/27/2022		5 Payee name Qualigraphics, Inc			
6 Amount (\$) 260.74		7 Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Push Cards	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 06/27/2022		Payee name Catherine Lee			
Amount (\$) 30.00		Payee address; City; State; Zip Code 1500 Marilla Street Dallas, TX 75201			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Donation		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Going away party Contribution	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 06/28/2022		Payee name Qualigraphics, Inc			
Amount (\$) 271.51		Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing materials	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED