| Supplement Officeholder | al Report | | FOR Cover She | MSR etSR |
|--|----------------------------|--|---|------------------|
| 1. CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR | FIRST MI Chad A | 2. Total Pages Filed: 105 | |
| | NICKNAME | LAST SUFFIX West | 3. Office Held Dallas City Coun | cil District 1 |
| 4. SUPPLEMENTAL REPORT TYPE | ☆ January 15 | c 30th day before election c Runoff | c 15th day after campa treasurer appointmer (officeholder only) | |
| | c July 15 | c 8th day before election c Exceeded \$500 limit | c Final Report | |
| 5. PERIOD / COVERED | | 7/1/2022 THROUGH 12/31/2022 | | |
| 6. ELECTION | Month Day Year 5/6/2023 | c Primary c Runoff $old X$ (| General c Spe | cial c N/A |
| 7. OFFICE- HOLDER | CONTRIBUTION TOTALS | TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LI PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS | • | \$0.00 |
| | | TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LO. | ANS) | \$15,024.40 |
| | EXPENDITURE | 3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LE | ESS, UNLESS ITEMIZED | \$ 0.00 |
| | TOTALS | 4. TOTAL OFFICEHOLDER EXPENDITURES | | \$ 18,623.96 |
| 8. POLITICAL CONTRIBUTION TOTALS | | 5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | | \$0.00 |
| (Campaign) | | 6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LO | DANS) | \$ 51,851.70 |
| | EXPENDITURE TOTALS | 7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED | | \$ 0.00 |
| | TOTALS | 8. TOTAL POLITICAL EXPENDITURES | | \$ 38,693.83 |
| 9. OFFICEHOLDER FUN FOR CAMPAIGN PURF | | 9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIB CAMPAIGN EXPENDITURES DURING THE REPORTING PER | | \$0.00 |
| 10. AFFIDAVIT | | I swear, or affirm, under penalty of perju is true and correct and includes all inforr me under Title 15, Election code. | | |
| | | ***ELECTRONICALLY CE | ERTIFIED*** | |
| AFFIX NOTARY STAN | IP / SEAL ABOVE | Signature of Candidate or | Officeholder | |
| Sworn to and subscribed b | pefore me, by the saidChad | A West | this the 17th | day |
| | | witness my hand and seal of office. | | |
| Signature of officer add | ministering oath | Printed name of officer administering oath | Title of officer adr | ninistering oath |

SCHEDULE A1

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| The | Instruction Guide explains how | to complete this | form. | 1 Total pages Schedule A1: 1 of 34 |
|---------------------------------|---|--------------------------|-----------------------------|---------------------------------------|
| 2 FILER NAME Chad A West | | | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor | out-of-state PAC | (ID#:) | 7 Amount of contribution (\$) |
| 07/01/2022 | Chris Bolding | | | 50.00 |
| Campaign Contribution | 6 Contributor address; 302 S. Rosemont Ave. | City; Dallas, | State; Zip Code TX 75208 | |
| 8 Principal occu | upation / Job title (See Instructions) | | 9 Employer (See Instruct | tions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 07/13/2022 | Angela Hunt | | | 250.00 |
| Campaign Contribution | Contributor address; 8811 Antrim Dr. | City; | State; Zip Code TX 75218 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | ions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 07/30/2022 | Gay J Revi | | | 50.00 |
| Campaign Contribution | Contributor address; 908 N. Bishop Ave. | City; Dallas, | State; Zip Code TX 75208 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | tions) |
| Date 08/15/2022 | Full name of contributor Susan Melnick | out-of-state PAC | (ID#:) | Amount of contribution (\$) 100.00 |
| Campaign Contribution | Contributor address; 2316 Kessler Pkwy | ^{City;} Dallas, | State: Zip Code TX 75208 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | iions) |
| | | | | |

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SCHEDULE A1

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| The | Instruction Guide explains how to complete this | form. | 1 Total pages Schedule A1: 2 of 34 |
|---------------------------------|---|-----------------------------|---------------------------------------|
| 2 FILER NAME Chad A West | | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor out-of-state PAC | : (ID#:) | 7 Amount of contribution (\$) |
| 08/22/2022 | Whitney Shern | | 200.00 |
| Campaign Contribution | 6 Contributor address; City; 8061 Walnut Hill Ln. Suite 914 Dallas, | State; Zip Code TX 75231 | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instruct | ions) |
| Date | Full name of contributor | : (ID#:) | Amount of contribution (\$) |
| 09/01/2022 | Jaynie Schultz | | 250.00 |
| Campaign Contribution | Contributor address; City; | State; Zip Code TX 75230 | |
| Principal occup | pation / Job title (See Instructions) | Employer (See Instruct | ions) |
| Date | Full name of contributor | : (ID#:) | Amount of contribution (\$) |
| 11/06/2022 | Carol Dingman | | 1000.00 |
| Campaign Contribution | Contributor address: City: | State; Zip Code TX 75234 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruct | ions) |
| Date 11/23/2022 | Full name of contributor □ out-of-state PAC Brooks A Brooks | : (ID#:) | Amount of contribution (\$) 250.00 |
| Campaign Contribution | Contributor address; City; 2242 Monitor St. Dallas, | State: Zip Code TX 75207 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruct | ions) |
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| The | Instruction Guide explains how | to complete this | form. | 1 Total pages Schedule A1: 3 of 34 |
|------------------------------------|---|------------------|-----------------------------------|---------------------------------------|
| 2 FILER NAME Chad A West | | | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 11/23/2022 | 5 Full name of contributor Joel Burns | out-of-state PAC | (ID#:) | 7 Amount of contribution (\$) 474.70 |
| Campaign Contribution | 6 Contributor address; 2420 S. Adams St. | City; Ft. Wo | State; Zip Code rth, TX 76110 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruc | tions) |
| Date 11/23/2022 | Full name of contributor Veletta Forsythe Lill | out-of-state PAC | (ID#:) | Amount of contribution (\$) 100.00 |
| Campaign Contribution | Contributor address; 622 Blair Blvd. | City; | State; Zip Code TX 75223 | 100.00 |
| Principal occup | nation / Job title (See Instructions) | | Employer (See Instruct | tions) |
| Date 11/23/2022 | Full name of contributor Jeremy Raines | _ | (ID#:) | Amount of contribution (\$) 949.70 |
| Campaign Contribution | Contributor address; 2313 Ashland Ave. | Citv: | State; Zip Code orth, TX 76107 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date 11/23/2022 | Full name of contributor Joe Urby | out-of-state PAC | (ID#:) | Amount of contribution (\$) 250.00 |
| Campaign Contribution | Contributor address; 1364 Romano Place | City; Dallas, | State: Zip Code TX 75215 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
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|-----------------------------|---|------------------|-------------------------------|---------------------------------------|
| | Instruction Guide explains how | to complete this | form. | 1 Total pages Schedule A1: 4 of 34 |
| 2 FILER NAME Chad A West | : | | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 11/24/2022 | Full name of contributor Stefani Bradshaw Contributor address; | out-of-state PAC | (ID#:) State; Zip Code | 7 Amount of contribution (\$) 500.00 |
| Campaign Contribution | 2929 Wycliff Ave. | - | , TX 75219 | |
| 8 Principal occi | upation / Job title (See Instructions) | | 9 Employer (See Instruc | tions) |
| Date 11/24/2022 | Full name of contributor Todd Hill | out-of-state PAC | C (ID#:) | Amount of contribution (\$) 250.00 |
| Campaign Contribution | Contributor address; 604 Ft. Worth Ave. | City; Dallas, | State; Zip Code TX 75208 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date 11/24/2022 | Full name of contributor Todd Hill | out-of-state PAC | C (ID#:) | Amount of contribution (\$) 250.00 |
| Campaign Contribution | Contributor address; P.O. Box 192305 | City; Dallas, | State; Zip Code ,TX 75219 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date 11/26/2022 | Full name of contributor Jake Gilbreath | out-of-state PAC | C (ID#:) | Amount of contribution (\$) 500.00 |
| Campaign Contribution | Contributor address; 2102 Sharon Ln. | City; Austin | State: Zip Code , TX 78703 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruc | ctions) |
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SCHEDULE A1

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| The | Instruction Guide explains how to complete this fo | orm. | 1 Total pages Schedule A1: 5 of 34 |
|--------------------------|--|-----------------------------|---------------------------------------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | | | |
| 4 Date | 5 Full name of contributor out-of-state PAC (II | D#:) | 7 Amount of contribution (\$) |
| 11/26/2022 | Shea Haass | | 150.00 |
| Campaign Contribution | 6 Contributor address; City; 3699 McKinney Ave. Suite 489D Dallas, T | State; Zip Code "X 75204 | |
| 8 Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | ons) |
| Date | Full name of contributor | D#:) | Amount of contribution (\$) |
| 11/26/2022 | Jennifer Hargraves | | 1000.00 |
| Campaign Contribution | Contributor address; City; 4201 Spring Valley Rd. Dallas, T | State; Zip Code | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | ons) |
| Date | Full name of contributor | D#:) | Amount of contribution (\$) |
| 11/26/2022 | Grant Woodruff | | 1000.00 |
| Campaign Contribution | Contributor address; City; 8315 Cabrera Dr. Dallas, T | State; Zip Code 'X 75228 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | ons) |
| Date 11/27/2022 | Full name of contributor out-of-state PAC (II Michael Veale | D#:) | Amount of contribution (\$) 250.00 |
| Campaign Contribution | Contributor address; City; 1717 Arts Plaza Suite 2207 Dallas, T | State: Zip Code X 75201 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | ons) |
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SCHEDULE A1

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| Campaign Contribution 6 Contribute 127 Pitts 8 Principal occupation / Job tits Date Full name 11/28/2022 Dianne Campaign Contribute | or address; sburgh St. e (See Instructions) of contributor Edwards or address; Iarlborough Ave. | City; Dallas, | State; Zip Code TX 75207 9 Employer (See Instruct C (ID#:) State; Zip Code TX 75208 | 7 Amount of contribution (\$) 500.00 Amount of contribution (\$) 100.00 |
|--|--|------------------|--|--|
| 4 Date 5 Full name 11/28/2022 Cullen I Campaign Contribution 6 Contribute 127 Pitts 8 Principal occupation / Job tits Date Full name 11/28/2022 Dianne 1 Campaign Contribution 223 S. M | or address; sburgh St. e (See Instructions) of contributor Edwards or address; Iarlborough Ave. | City; Dallas, | State; Zip Code , TX 75207 9 Employer (See Instruction Code) C (ID#:) State; Zip Code | 500.00 tions) Amount of contribution (\$) |
| Campaign Contribution 6 Contribute 127 Pitts 8 Principal occupation / Job tits Date Full name 11/28/2022 Dianne Campaign Contribution Contribution Contribution Contribution Contribution Contribution | or address; sburgh St. e (See Instructions) of contributor Edwards or address; Iarlborough Ave. | City; Dallas, | State; Zip Code , TX 75207 9 Employer (See Instruction Code) C (ID#:) State; Zip Code | 500.00 tions) Amount of contribution (\$) |
| Campaign Contribution 6 Contribute 127 Pitts 8 Principal occupation / Job titt Date Full name 11/28/2022 Dianne Campaign Contribution 223 S. M | or address; sburgh St. e (See Instructions) of contributor Edwards or address; Iarlborough Ave. | City; Dallas, | TX 75207 9 Employer (See Instruction (S | tions) Amount of contribution (\$) |
| Contribution 127 Pitts 8 Principal occupation / Job tits Date Full name 11/28/2022 Dianne Campaign Contribute Contribution 223 S. M | e (See Instructions) of contributor Edwards or address; Iarlborough Ave. | Dallas, | TX 75207 9 Employer (See Instruction (S | Amount of contribution (\$) |
| Date Full name 11/28/2022 Dianne Campaign Contribution 223 S. M | of contributor Edwards or address; Iarlborough Ave. | | C (ID#:) State; Zip Code | Amount of contribution (\$) |
| 11/28/2022 Dianne Contribution Contribution 223 S. M | Edwards or address; Iarlborough Ave. | | State; Zip Code | |
| Campaign Contribution 223 S. M | or address; Iarlborough Ave. | City; | State; Zip Code | 100.00 |
| Campaign Contribution 223 S. M | or address; farlborough Ave. | City; | State; Zip Code | |
| Principal occupation / Job title | (See Instructions) | | | |
| | | | Employer (See Instruct | tions) |
| Date Full name | of contributor | out-of-state PAC | C (ID#:) | Amount of contribution (\$) |
| 11/28/2022 Daniel S | mith | | | 1000.00 |
| Campaign Contribute Contribution 1402 Ex | or address; eter Ct. | City; Southla | State; Zip Code ake, TX 76092 | |
| Principal occupation / Job title | e (See Instructions) | | Employer (See Instruct | tions) |
| Date Full name 11/29/2022 Michael | of contributor Clark | out-of-state PAC | C (ID#:) | Amount of contribution (\$) 1000.00 |
| Campaign Contribut Contribution 6750 Hi | or address; Ilcrest Plaza Dr. | City; Dallas, | State: Zip Code , TX 75230 | |
| Principal occupation / Job title | e (See Instructions) | | Employer (See Instruct | tions) |

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| | | | 1 Total pages Schedule A1: |
|---------------------------------|--|----------------------------|---------------------------------------|
| The | Instruction Guide explains how to complete this fo | orm. | 7 of 34 |
| 2 FILER NAME Chad A West | | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID | D#:) | 7 Amount of contribution (\$) |
| 11/29/2022 | Harold Ginsburg | | 500.00 |
| Campaign Contribution | 6 Contributor address; City; 2610 Fairmount St. Dallas, T. | State; Zip Code X 75201 | |
| 8 Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | ons) |
| Date | Full name of contributor | D#:) | Amount of contribution (\$) |
| 11/30/2022 | Isabella Mohr | | 100.00 |
| Campaign Contribution | | State; Zip Code X 75211 | |
| Principal occup | pation / Job title (See Instructions) | Employer (See Instruction | ons) |
| Date | Full name of contributor out-of-state PAC (ID | D#:) | Amount of contribution (\$) |
| 11/30/2022 | David Spence | | 1000.00 |
| Campaign Contribution | Contributor address; City; 408 W. 8th St. Suite 103 Dallas, T. | State; Zip Code X 75208 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | ons) |
| Date 12/02/2022 | Full name of contributor |)#:) | Amount of contribution (\$) 250.00 |
| Campaign Contribution | Contributor address; City; Dallas, T2 | State: Zip Code X 75201 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | ons) |
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| ull name of contributor Clinton Haley ontributor address; 6311 Club Lake Ct. | out-of-state PAC | form. (ID#:) State; Zip Code TX 75214 | 1 Total pages Schedule A1: 8 of 34 3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$) 500.00 |
|--|---|---|--|
| Clinton Haley ontributor address; 5311 Club Lake Ct. | City; | State; Zip Code | 7 Amount of contribution (\$) |
| Clinton Haley ontributor address; 5311 Club Lake Ct. | City; | State; Zip Code | · · · |
| Clinton Haley ontributor address; 5311 Club Lake Ct. | City; | State; Zip Code | · · · |
| ontributor address; 5311 Club Lake Ct. | • | | 500.00 |
| 5311 Club Lake Ct. | • | | |
| / Job title (See Instructions) | | l | |
| | | 9 Employer (See Instruc | iions) |
| ull name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| Marc Andres | | | 250.00 |
| * | City; Dallas, | State; Zip Code TX 75206 | |
| Job title (See Instructions) | | Employer (See Instruct | ions) |
| ull name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| | | | 100.00 |
| ontributor address; | City; | State; Zip Code TX 75208 | |
| / Job title (See Instructions) | | Employer (See Instruct | tions) |
| Becky Connatser | | (ID#:) | Amount of contribution (\$) 250.00 |
| | | State: Zip Code TX 75208 | |
| / Job title (See Instructions) | | Employer (See Instruc | lions) |
| | contributor address; 2800 N. Henderson Ave. / Job title (See Instructions) ull name of contributor Cheryl Aukeman ontributor address; 1915 W. Colorado Blvd / Job title (See Instructions) | Contributor address; City; Dallas, Zaboo N. Henderson Ave. Dallas, Job title (See Instructions) Cheryl Aukeman Cheryl Aukeman City; Dallas, Job title (See Instructions) City; Dallas, City; Dallas, | Contributor address; City; State; Zip Code Dallas, TX 75206 Job title (See Instructions) Employer (See Instructions) |

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| The | Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: 9 of 34 |
|---------------------------------|---|---------------------------------------|
| 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: | 7 Amount of contribution (\$) |
| 12/05/2022 | Nate Evans | 250.00 |
| Campaign Contribution | 6 Contributor address; City; State; Zi 3572 Boone Park Ave. Jacksonville, FL 32 | p Code 205 |
| 8 Principal occu | pation / Job title (See Instructions) 9 Employe | r (See Instructions) |
| Date | Full name of contributor out-of-state PAC (ID#: | Amount of contribution (\$) |
| 12/05/2022 | Rick Garza | 1000.00 |
| Campaign Contribution | Contributor address; City; State; Z 101 S. Jennings Ave. Suite 100 Ft. Worth, TX 7610 | ip Code |
| Principal occup | pation / Job title (See Instructions) Employe | r (See Instructions) |
| Date | Full name of contributor | Amount of contribution (\$) |
| 12/05/2022 | Jonas Park | 100.00 |
| Campaign Contribution | Contributor address; City; State; Zi 4333 Belmont Ave. Suite 2 Dallas, TX 75204 | p Code |
| Principal occup | pation / Job title (See Instructions) Employe | r (See Instructions) |
| Date 12/05/2022 | Full name of contributor out-of-state PAC (ID#: David Preziosi | Amount of contribution (\$) 250.00 |
| Campaign Contribution | Contributor address; City; State; Zi 2229 Lawndale Dr. Dallas, TX 75211 | o Code |
| Principal occup | Dation / Job title (See Instructions) Employe | r (See Instructions) |
| | | |

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| The | Instruction Guide explains how | to complete this | form. | 1 Total pages Schedule A1: 10 of 34 |
|---------------------------------|--|------------------|-------------------------------|--|
| 2 FILER NAME Chad A West | | | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor | out-of-state PAC | C (ID#:) | 7 Amount of contribution (\$) |
| 12/06/2022 | Mike Gruber | | | 1000.00 |
| Campaign Contribution | 6 Contributor address; 1918 Olive St. | City; Dallas, | State; Zip Code , TX 75201 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruc | tions) |
| Date | Full name of contributor | out-of-state PAC | C (ID#:) | Amount of contribution (\$) |
| 12/07/2022 | Lucy Billingsley | | | 949.70 |
| Campaign Contribution | Contributor address; 1722 Routh St. Suite 770 | City; Dallas, | State; Zip Code , TX 75201 | |
| Principal occup | ation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date | Full name of contributor | out-of-state PAC | C (ID#:) | Amount of contribution (\$) |
| 12/09/2022 | Lucilo Peña | | | 474.70 |
| Campaign Contribution | Contributor address; 1717 Arts Plaza Suite 2311 | City; Dallas, | State; Zip Code ,TX 75201 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date 12/09/2022 | Full name of contributor Elizabeth Schorman | | C (ID#:) | Amount of contribution (\$) 250.00 |
| Campaign Contribution | Contributor address; 1219 N. Winnetka Ave. | | State: Zip Code TX 75208 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| | | | | |

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SCHEDULE A1

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| The | Instruction Guide explains how t | o complete this | form. | 1 Total pages Schedule A1: 11 of 34 |
|-----------------------------|---|------------------|-----------------------------------|--|
| 2 FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | | | | |
| 4 Date | 5 Full name of contributor | out-of-state PAC | (ID#:) | 7 Amount of contribution (\$) |
| 12/09/2022 | Doug Taylor | | | 25.00 |
| Campaign Contribution | 6 Contributor address; 1147 N. Winnetka Ave. | City; Dallas, | State; Zip Code TX 75208 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruct | tions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 12/10/2022 | Barbara Alvarado | | | 100.00 |
| Campaign Contribution | Contributor address; 318 S. Waverly Dr. | City; | State; Zip Code TX 75208 | |
| Principal occu _l | pation / Job title (See Instructions) | | Employer (See Instruct | ions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 12/07/2022 | Timothy C Headington | | | 1000.00 |
| Campaign Contribution | Contributor address; 1608 Main St. Suite 2 | City; Dallas, | State; Zip Code TX 75201 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | tions) |
| Date 12/10/2022 | Full name of contributor John Matthews | out-of-state PAC | (ID#:) | Amount of contribution (\$) 1000.00 |
| Campaign Contribution | Contributor address; 320 W. Main St. | City; Lewisv | State: Zip Code ille, TX 75057 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | tions) |
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| The | Instruction Guide explains how | to complete this | form. | 1 Total pages Schedule A1: 12 of 34 |
|---------------------------------|---|------------------|-----------------------------|--|
| 2 FILER NAME Chad A West | | | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor | out-of-state PAC | C (ID#:) | 7 Amount of contribution (\$) |
| 12/10/2022 | Melissa Pirkey | | | 1000.00 |
| Campaign Contribution | 6 Contributor address; 1525 Parliament Ln. | City; Plano, | State; Zip Code TX 75093 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruct | tions) |
| Date | Full name of contributor | out-of-state PAC | G (ID#:) | Amount of contribution (\$) |
| 12/11/2022 | Joe Wilson | | | 250.00 |
| Campaign Contribution | Contributor address; 6208 Copperhill Dr. | City; | State; Zip Code TX 75248 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruct | cions) |
| Date | Full name of contributor | out-of-state PAC | C (ID#:) | Amount of contribution (\$) |
| 12/12/2022 | Joe McElroy | | | 1000.00 |
| Campaign Contribution | Contributor address; 1207 Eldorado Ave. | City; Dallas, | State; Zip Code TX 75208 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | tions) |
| Date 12/12/2022 | Full name of contributor Patrick Beitler | out-of-state PAC | (ID#:) | Amount of contribution (\$) 100.00 |
| Campaign Contribution | Contributor address; 1218 Elmwood Blvd | City; Dallas, | State: Zip Code TX 75224 | |
| Principal occu | Dation / Job title (See Instructions) | | Employer (See Instruct | tions) |
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| The | Instruction Guide explains how to com | nplete this form. | 1 Total pages Schedule A1: 13 of 34 |
|--------------------------|--|--|--|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | | | |
| 4 Date | 5 Full name of contributor out | -of-state PAC (ID#:) | 7 Amount of contribution (\$) |
| 12/12/2022 | Sylvia Camarillo | | 500.00 |
| Campaign Contribution | 6 Contributor address; Ci 3 Richmond Ct. | ty; State; Zip Code Mansfield, TX 76063 | |
| 8 Principal occ | pation / Job title (See Instructions) | 9 Employer (See Instruc | etions) |
| Date | Full name of contributor | -of-state PAC (ID#:) | Amount of contribution (\$) |
| 12/12/2022 | Leo Cusimano | | 237.20 |
| Campaign Contribution | | ity; State; Zip Code Dallas, TX 75208 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruc | itions) |
| Date | Full name of contributor | -of-state PAC (ID#:) | Amount of contribution (\$) |
| 12/12/2022 | Amy Davis | | 100.00 |
| Campaign Contribution | Contributor address; Ci 1106 N. Clinton Ave | ty; State; Zip Code Dallas, TX 75208 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruc | tions) |
| Date 12/12/2022 | Full name of contributor out | -of-state PAC (ID#:) | Amount of contribution (\$) 1000.00 |
| Campaign Contribution | Contributor address; Cit 1860 Masters Dr. | Dallas, TX 75115 ^{Zip Code} | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruc | etions) |
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SCHEDULE A1

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| The | Instruction Guide explains how t | to complete this | form. | 1 Total pages Schedule A1: 14 of 34 |
|---------------------------------|--|------------------|----------------------------------|---------------------------------------|
| 2 FILER NAME Chad A West | | | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor | out-of-state PAC | (ID#:) | 7 Amount of contribution (\$) |
| 12/12/2022 | Laura Estrada | | | 250.00 |
| Campaign Contribution | 6 Contributor address; 1339 Cedar Hill Ave. | City; Dallas, | State; Zip Code TX 75208 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruct | ions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 12/12/2022 | Elisa Goodwin | | | 94.70 |
| Campaign Contribution | Contributor address; 2310 Broken Point | City; | State; Zip Code ney, TX 75702 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instructi | ions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 12/12/2022 | Jane Hope Hamilton | | | 250.00 |
| Campaign Contribution | Contributor address; 623 Aspen Valley Ln. | City; Dallas, | State; Zip Code TX 75208 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | ions) |
| Date 12/12/2022 | Full name of contributor Junior Huerta | out-of-state PAC | (ID#:) | Amount of contribution (\$) 800.00 |
| Campaign Contribution | Contributor address: 2135 Elmwood Blvd | City; Dallas, | State: Zip Code TX 75224 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | ions) |
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|---------------------------------|---|------------------|-------------------------------------|--|
| 2 FILER NAME Chad A West | | | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor | out-of-state PAC | ; (ID#:) | 7 Amount of contribution (\$) |
| 12/12/2022 | William Long | | | 500.00 |
| Campaign Contribution | 6 Contributor address; 3500 Kim Dr. | City; Irving, | State; Zip Code TX 75061 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruct | tions) |
| Date | Full name of contributor | out-of-state PAC | ; (ID#:) | Amount of contribution (\$) |
| 12/12/2022 | Zachary Krochtengel | | | 250.00 |
| Campaign Contribution | Contributor address; 17014 Preston Bend Dr. | City; | State; Zip Code TX 75248 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | ions) |
| Date | Full name of contributor | out-of-state PAC | : (ID#:) | Amount of contribution (\$) |
| 12/12/2022 | Rolando Leal | | | 250.00 |
| Campaign Contribution | Contributor address; 414 N. Casa Grande Cir. | City; Duncar | State; Zip Code nville, TX 75116 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | iions) |
| Date 12/12/2022 | Full name of contributor Sarah Andres | out-of-state PAC | : (ID#:) | Amount of contribution (\$) 1000.00 |
| Campaign Contribution | Contributor address; P.O. Box 17428 | City; Austin | , TX 78760 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | tions) |
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|--------------------------|---|------------------|-----------------------------|---------------------------------------|
| 2 FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | | | | |
| 4 Date | 5 Full name of contributor | out-of-state PAC | C (ID#:) | 7 Amount of contribution (\$) |
| 12/12/2022 | Bridget Lopez | | | 500.00 |
| Campaign Contribution | 6 Contributor address; 4326 Meadowdale Ln. | City; Dallas, | State; Zip Code TX 75229 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruc | tions) |
| Date | Full name of contributor | out-of-state PAC | C (ID#:) | Amount of contribution (\$) |
| 12/12/2022 | Norma Minnis | | | 100.00 |
| Campaign Contribution | Contributor address; P.O. Box 140977 | City; | State; Zip Code TX 75214 | |
| Principal occup | nation / Job title (See Instructions) | | Employer (See Instruct | tions) |
| Date | Full name of contributor | out-of-state PAC | C (ID#:) | Amount of contribution (\$) |
| 12/12/2022 | Marci Orr | | | 250.00 |
| Campaign Contribution | Contributor address; 211 S. Tyler St. | City; Dallas, | State; Zip Code TX 75224 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date 12/12/2022 | Full name of contributor Gerald Owens | out-of-state PAC | C (ID#:) | Amount of contribution (\$) 200.00 |
| Campaign Contribution | Contributor address: 1508 Winding Hollow Ln. | City; Plano, | State: Zip Code TX 75093 | |
| | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |

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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | | | |
| 4 Date | 5 Full name of contributor out- | of-state PAC (ID#:) | 7 Amount of contribution (\$) |
| 12/12/2022 | Paul Ridley | | 500.00 |
| Campaign Contribution | 6 Contributor address; Cit 5100 Victor St. | y; State; Zip Code Dallas, TX 75214 | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instruc | ctions) |
| Date | Full name of contributor | of-state PAC (ID#:) | Amount of contribution (\$) |
| 12/12/2022 | Arthur Santa Maria | | 1000.00 |
| Campaign Contribution | Contributor address; Cit 785 Huntingdon St. | | |
| Principal occu _l | pation / Job title (See Instructions) | Employer (See Instruc | tions) |
| Date | Full name of contributor | of-state PAC (ID#:) | Amount of contribution (\$) |
| 12/12/2022 | Harold Thorne | | 500.00 |
| Campaign Contribution | Contributor address; Cit 3550 Gifco Rd. | y; State; Zip Code Midlothian, TX 76065 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruc | tions) |
| Date 12/12/2022 | Full name of contributor 🔲 out- Roger Wedell | of-state PAC (ID#:) | Amount of contribution (\$) 250.00 |
| Campaign Contribution | Contributor address; City 1318 Elmwood Blvd. | State: Zip Code Dallas, TX 75224 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruc | stions) |
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|--------------------------|---|--------------------|-----------------------------|--|
| 2 FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | - | | | (|
| 4 Date | 5 Full name of contributor | □ out-of-state PAC | : (ID#:) | 7 Amount of contribution (\$) |
| 12/13/2022 | Lisa Sievers | | , (1511) | 50.00 |
| Campaign Contribution | 6 Contributor address; 8238 Barbaree Blvd. | City; Dallas, | State; Zip Code TX 75228 | |
| 8 Principal occ | upation / Job title (See Instructions) | | 9 Employer (See Instruc | tions) |
| Date | Full name of contributor | out-of-state PAC | ; (ID#:) | Amount of contribution (\$) |
| 12/13/2022 | David Smades | | | 100.00 |
| Campaign Contribution | Contributor address; 732 Kessler Lake Dr. | City; | State; Zip Code TX 75208 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | tions) |
| Date | Full name of contributor | out-of-state PAC | ; (ID#:) | Amount of contribution (\$) |
| 12/14/2022 | Lydia Addy | | | 1000.00 |
| Campaign Contribution | Contributor address; 3805 Normandy Ave. | City; Dallas, | State; Zip Code TX 75205 | |
| Principal occi | upation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date 12/14/2022 | Full name of contributor William Addy | out-of-state PAC | : (ID#:) | Amount of contribution (\$) 1000.00 |
| Campaign Contribution | Contributor address; 3805 Normandy Ave. | City; Dallas, | State: Zip Code TX 75205 | |
| Principal occi | upation / Job title (See Instructions) | | Employer (See Instruct | tions) |
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|---------------------------------|--|-------------------|-------------------------------------|--|
| 2 FILER NAME Chad A West | | | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor | out-of-state PAC | (ID#:) | 7 Amount of contribution (\$) |
| 12/16/2022 | Katherine Crow | | | 1000.00 |
| Campaign Contribution | 6 Contributor address; 4700 Preston Rd. | City; | State; Zip Code TX 75205 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instructi | ions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 12/16/2022 | Ken Valach | | | 1000.00 |
| Campaign Contribution | Contributor address; 5 Lazee Trail | City; | State; Zip Code n, TX 77024 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instructi | ions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 12/19/2022 | Zachary Baum | | | 25.00 |
| Campaign Contribution | Contributor address; P.O. Box 587 | City; East Set | State; Zip Code tauket, NY 11733 | |
| Principal occup | ation / Job title (See Instructions) | | Employer (See Instructi | ions) |
| Date 12/20/2022 | Full name of contributor Kevin Bryant | out-of-state PAC | (ID#:) | Amount of contribution (\$) 142.20 |
| Campaign Contribution | Contributor address: 4463 Brookview Dr. | City; Dallas, | State: Zip Code TX 75220 | |
| Principal occup | ation / Job title (See Instructions) | | Employer (See Instruct | ions) |
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|--------------------------|--|------------------------------------|---------------------------------------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | | | |
| 4 Date | 5 Full name of contributor out-of-stat | e PAC (ID#:) | 7 Amount of contribution (\$) |
| 12/20/2022 | Harlan Crow | | 100.00 |
| Campaign Contribution | 6 Contributor address; City; 3819 Maple Ave. Da | State; Zip Code Illas, TX 75219 | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instruc | ctions) |
| Date | Full name of contributor ut-of-stat | PAC (ID#:) | Amount of contribution (\$) |
| 12/21/2022 | Brock Ellison | | 50.00 |
| Campaign Contribution | Contributor address; City; | State; Zip Code wlett, TX 75089 | |
| Principal осси | ation / Job title (See Instructions) | Employer (See Instruc | ctions) |
| Date | Full name of contributor | PAC (ID#:) | Amount of contribution (\$) |
| 12/21/2022 | Crystal Gonzalez | | 500.00 |
| Campaign Contribution | Contributor address; City; 6231 Meadow Rd. Da | State; Zip Code Illas, TX 75230 | |
| Principal occu | vation / Job title (See Instructions) | Employer (See Instruc | tions) |
| Date 12/27/2022 | Full name of contributor | ⇒ PAC (ID#:) | Amount of contribution (\$) 250.00 |
| Campaign Contribution | Contributor address; City; 815 W. Greenbriar Ln. Da | State: Zip Code llas, TX 75208 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruc | tions) |
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|--------------------------|---|------------------|-----------------------------|--|
| 2 FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | | | | |
| 4 Date | 5 Full name of contributor | out-of-state PAC | (ID#:) | 7 Amount of contribution (\$) |
| 12/27/2022 | Christopher Edgemon | | | 100.00 |
| Campaign Contribution | 6 Contributor address; 5540 Farquhar | City; Dallas, | State; Zip Code TX 75209 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruct | ions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 12/27/2022 | Clyde Greenhouse | | | 100.00 |
| Campaign Contribution | Contributor address; 1129 N. Beckley Ave | City; | State; Zip Code TX 75208 | |
| Principal occup | ation / Job title (See Instructions) | | Employer (See Instruct | ions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 12/27/2022 | Steve Kemble | | | 250.00 |
| Campaign Contribution | Contributor address; 2206 Marilla St. | City; Dallas, | State; Zip Code TX 75201 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruct | ions) |
| Date 12/27/2022 | Full name of contributor Jill McLaren | out-of-state PAC | (ID#:) | Amount of contribution (\$) 237.20 |
| Campaign Contribution | Contributor address; 6051 Kenwood Ave. | City; Dallas, | State: Zip Code TX 75206 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruct | ions) |
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|--------------------------|---|-----------------------------------|--|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | | | |
| 4 Date | 5 Full name of contributor ut-of-state P | AC (ID#:) | 7 Amount of contribution (\$) |
| 12/27/2022 | Lawrence Worden | | 100.00 |
| Campaign Contribution | 6 Contributor address; City; 2019 Old Orchard Dr. Dalla | State; Zip Code as, TX 75230 | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instruct | tions) |
| Date | Full name of contributor | AC (ID#:) | Amount of contribution (\$) |
| 12/27/2022 | Ed Wynne | | 100.00 |
| Campaign Contribution | Contributor address; City; 1225 Lausanne Ave Dalla | State; Zip Code as, TX 75208 | |
| Principal occup | ation / Job title (See Instructions) | Employer (See Instruct | tions) |
| Date | Full name of contributor | AC (ID#:) | Amount of contribution (\$) |
| 12/28/2022 | Logan Hampton | | 189.70 |
| Campaign Contribution | Contributor address; City; 2501 N. Harwood St. Suite 2400 Dalla | State; Zip Code as, TX 75201 | |
| Principal occup | ation / Job title (See Instructions) | Employer (See Instruct | tions) |
| Date 12/28/2022 | Full name of contributor | AC (ID#:) | Amount of contribution (\$) 250.00 |
| Campaign Contribution | Contributor address; City; 2368 Rice Blvd Hous | State: Zip Code iton, TX 77005 | |
| | ation / Job title (See Instructions) | Employer (See Instruc | tions) |

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|--------------------------|---|------------------|--------------------------------|--|
| 2 FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | | | | |
| 4 Date | 5 Full name of contributor | out-of-state PAC | (ID#:) | 7 Amount of contribution (\$) |
| 12/28/2022 | Dianna Lawrence | | | 50.00 |
| Campaign Contribution | 6 Contributor address; 1905 Mar West St. | City; Tiburor | State; Zip Code n, CA 94920 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruct | ions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 12/28/2022 | Heather Linburg | | | 1000.00 |
| Campaign Contribution | | City; | State; Zip Code TX 75209 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruct | ions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 12/28/2022 | Will Rouse | | | 189.70 |
| Campaign Contribution | | City; Dallas, | State; Zip Code TX 75201 | |
| Principal occup | ation / Job title (See Instructions) | | Employer (See Instruct | ions) |
| Date 12/29/2022 | Full name of contributor 🔲 o | out-of-state PAC | (ID#:) | Amount of contribution (\$) 1000.00 |
| Campaign Contribution | Contributor address; (5901 Palo Pinto Ave. | City; Dallas, | State: Zip Code TX 75206 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | ions) |
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|--------------------------|---|------------------|-------------------------------|--|
| 2 FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | | | | |
| 4 Date | 5 Full name of contributor | out-of-state PAC | C (ID#:) | 7 Amount of contribution (\$) |
| 12/29/2022 | Scott Larsen | | | 100.00 |
| Campaign Contribution | 6 Contributor address; 665 Kessler Reserve Ct. | City; Dallas, | State; Zip Code , TX 75208 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruct | tions) |
| Date | Full name of contributor | out-of-state PAC | C (ID#:) | Amount of contribution (\$) |
| 12/29/2022 | Gayla McGinnis | | | 100.00 |
| Campaign Contribution | Contributor address; 4144 N Central Expwy. | City; | State; Zip Code , TX 75204 | |
| Principal occup | aation / Job title (See Instructions) | | Employer (See Instruct | iions) |
| Date | Full name of contributor | out-of-state PAC | C (ID#:) | Amount of contribution (\$) |
| 12/30/2022 | Rohan Bhatt | | | 1000.00 |
| Campaign Contribution | Contributor address; 5932 Rosebud Dr. | City; Dallas, | State; Zip Code , TX 75252 | |
| Principal occup | Dation / Job title (See Instructions) | | Employer (See Instruct | tions) |
| Date 12/30/2022 | Full name of contributor Chris Culak | out-of-state PAC | ; (ID#:) | Amount of contribution (\$) 50.00 |
| Campaign Contribution | Contributor address; 1223 Kings Hwy. | City; Dallas, | State: Zip Code , TX 75208 | |
| Principal occup | Dation / Job title (See Instructions) | | Employer (See Instruct | tions) |
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|--------------------------|--|------------------|-----------------------------|--|
| 2 FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | | | | |
| 4 Date | 5 Full name of contributor | out-of-state PAC | (ID#:) | 7 Amount of contribution (\$) |
| 12/30/2022 | Daniel Huerta | | | 100.00 |
| Campaign Contribution | 6 Contributor address; 1414 Cedar Hill Ave. | City; Dallas, | State; Zip Code TX 75208 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruct | tions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 12/30/2022 | Mary Ann Jenkins | | | 100.00 |
| Campaign Contribution | Contributor address; 744 S. Manus Dr. | City; | State; Zip Code TX 75224 | |
| Principal occup | ation / Job title (See Instructions) | | Employer (See Instruct | ions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 12/30/2022 | Gary Spence | | | 400.00 |
| Campaign Contribution | Contributor address; 1921 Marydale Dr. | City; Dallas, | State; Zip Code TX 75208 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruct | iions) |
| Date 12/31/2022 | Full name of contributor Justin Ardendorff | out-of-state PAC | (ID#:) | Amount of contribution (\$) 100.00 |
| Campaign Contribution | Contributor address: 3508 Bryn Mawr Dr. | City; Dallas, | State: Zip Code TX 75225 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruct | tions) |
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|---------------------------------|---|------------------|-------------------------------|--|
| 2 FILER NAME Chad A West | | | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/31/2022 | 5 Full name of contributor Doug Banerjee | _ | C (ID#:) | 7 Amount of contribution (\$) 250.00 |
| Campaign Contribution | 6 Contributor address; 6911 Ellsworth Ave. | City; Dallas, | State; Zip Code , TX 75214 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruc | ! :tions) |
| Date 12/31/2022 | Full name of contributor Roberta Christopher | out-of-state PAC | C (ID#:) | Amount of contribution (\$) 50.00 |
| Campaign Contribution | Contributor address; 307 N. Windomere Ave. | City; Dallas, | State; Zip Code , TX 75208 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date 12/31/2022 | Full name of contributor Ben Coffee | out-of-state PAC | C (ID#:) | Amount of contribution (\$) 25.00 |
| Campaign Contribution | Contributor address; 2169 Kessler Ct. | City; Dallas, | State; Zip Code , TX 75208 | |
| Principal occu | Dation / Job title (See Instructions) | | Employer (See Instruc | itions) |
| Date 12/31/2022 | Full name of contributor Byron Cryer | | C (ID#:) | Amount of contribution (\$) 100.00 |
| Campaign Contribution | Contributor address: 627 Kessler Lake Dr | | State: Zip Code , TX 75208 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
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|--------------------------|--|------------------|-----------------------------|--|
| 2 FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | | | | |
| 4 Date | 5 Full name of contributor [| out-of-state PAC | (ID#:) | 7 Amount of contribution (\$) |
| 12/31/2022 | Tiffany Hicks | | | 50.00 |
| Campaign Contribution | 6 Contributor address; 740 Rainbow Dr. | City; Dallas, | State; Zip Code TX 75208 | |
| 8 Principal occi | upation / Job title (See Instructions) | | 9 Employer (See Instruct | ions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 12/31/2022 | Eric Johnson | | | 500.00 |
| Campaign Contribution | Contributor address; 3525 Turtle Creek Blvd. | City; | State; Zip Code TX 75219 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | ions) |
| Date | Full name of contributor | out-of-state PAC | (ID#:) | Amount of contribution (\$) |
| 12/31/2022 | Sarah Lamb | | | 500.00 |
| Campaign Contribution | Contributor address; 5630 Willis Ave. | City; Dallas, | State; Zip Code TX 75206 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | ions) |
| Date 12/31/2022 | Full name of contributor Sarah Lamb | out-of-state PAC | (ID#:) | Amount of contribution (\$) 250.00 |
| Campaign Contribution | Contributor address; 5630 Willis Ave. | City; Dallas, | State: Zip Code TX 75206 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | ions) |
| | | | | |

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SCHEDULE A1

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

| The | Instruction Guide explains how | to complete this | form. | 1 Total pages Schedule A1: 28 of 34 |
|---------------------------------|---|------------------|-------------------------------|--|
| 2 FILER NAME Chad A West | | | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/31/2022 | Full name of contributor Angela Linburg | | C (ID#:) | 7 Amount of contribution (\$) 250.00 |
| Campaign Contribution | 6 Contributor address; 4660 N. Versailles Ave. | City; Dallas, | State; Zip Code TX 75209 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruc | tions) |
| Date 12/31/2022 | Full name of contributor Krista Nightengale | out-of-state PAC | (ID#:) | Amount of contribution (\$) 50.00 |
| Campaign Contribution | Contributor address; 1623 Main St. Suite 512 | City; Dallas, | State; Zip Code , TX 75201 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date 12/31/2022 | Full name of contributor Benjamin Orr | out-of-state PAC | C (ID#:) | Amount of contribution (\$) 50.00 |
| Campaign Contribution | Contributor address; 518 N. Manus Dr. | City; Dallas, | State; Zip Code , TX 75222 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date 12/31/2022 | Full name of contributor Joel Perez | | C (ID#:) | Amount of contribution (\$) 50.00 |
| Campaign Contribution | Contributor address; 1303 Lansford Ave. | | State; Zip Code , TX 75224 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
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SCHEDULE A1

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| The | Instruction Guide explains how | to complete this | form. | 1 Total pages Schedule A1: 29 of 34 |
|---------------------------------|---|------------------|---------------------------------|--|
| 2 FILER NAME Chad A West | | | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor | out-of-state PAC | : (ID#:) | 7 Amount of contribution (\$) |
| 12/31/2022 | Suzanne Smith | | | 100.00 |
| Campaign Contribution | 6 Contributor address; 3210 Carlisle St. | City; Dallas, | State; Zip Code TX 75204 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruct | tions) |
| Date | Full name of contributor | out-of-state PAC | : (ID#:) | Amount of contribution (\$) |
| 12/31/2022 | David White | | | 500.00 |
| Campaign Contribution | Contributor address; 15750 Spectrum Dr. | City; | State; Zip Code on, TX 75001 | |
| Principal occup | oation / Job title (See Instructions) | | Employer (See Instruct | tions) |
| Date | Full name of contributor | out-of-state PAC | : (ID#:) | Amount of contribution (\$) |
| 12/31/2022 | Megan Wood | | | 1000.00 |
| Campaign Contribution | Contributor address; 5121 Southbrook Dr. | City; Dallas, | State; Zip Code TX 75209 | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instruct | tions) |
| Date 12/31/2022 | Full name of contributor Tom Zielinski | out-of-state PAC | (ID#:) | Amount of contribution (\$) 237.20 |
| Campaign Contribution | Contributor address; 2717 Conflans Rd. | City; Irving, | State: Zip Code TX 75061 | |
| Principal occu | Dation / Job title (See Instructions) | | Employer (See Instruct | tions) |
| | | | | |

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SCHEDULE A1

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| The | Instruction Guide explains how | to complete this | form. | 1 Total pages Schedule A1: 30 of 34 |
|---------------------------------|--|------------------|--|---------------------------------------|
| 2 FILER NAME Chad A West | | | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor | out-of-state PAC | C (ID#:) | 7 Amount of contribution (\$) |
| 11/12/2022 | Kathy Hewitt | | | 474.70 |
| Officeholder Contribution | 6 Contributor address; 1410 Yakimo Dr. | City; | State; Zip Code , TX 75208 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruc | tions) |
| Date 11/25/2022 | Full name of contributor Katherine Homan | out-of-state PAC | C (ID#:) | Amount of contribution (\$) 500.00 |
| Officeholder Contribution | Contributor address; 1629 Handley Dr. | City; Dallas, | State; Zip Code , TX 75208 | 300.00 |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date 11/28/2022 | Full name of contributor Kim Parker | out-of-state PAC | C (ID#:) | Amount of contribution (\$) 1000.00 |
| Officeholder Contribution | Contributor address; 13330 Noel Rd. | City; Dallas, | State; Zip Code , TX 75240 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date 12/07/2022 | Full name of contributor Timothy Headington | out-of-state PAC | C (ID#:) | Amount of contribution (\$) 4000.00 |
| Officeholder Contribution | Contributor address; 1608 Main St. Suite 2 | City; Dallas, | State; TX 75201 ^{Zip Code} | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| | | | | |

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SCHEDULE A1

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

| The | Instruction Guide explains how | to complete this | s form. | 1 Total pages Schedule A1: 31 of 34 |
|------------------------------|--|------------------|------------------------------------|--|
| 2 FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | | | | |
| 4 Date | 5 Full name of contributor | out-of-state PAC | C (ID#:) | 7 Amount of contribution (\$) |
| 12/10/2022 | John Matthews | | | 1000.00 |
| Officeholder Contribution | 6 Contributor address; 320 W. Main St. | City; Lewisy | State; Zip Code ville, TX 75057 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruc | tions) |
| Date | Full name of contributor | out-of-state PAC | C (ID#:) | Amount of contribution (\$) |
| 12/12/2022 | Jennifer Owen | | | 100.00 |
| Officeholder Contribution | Contributor address; 6541 Arborist Ln. | City; | State; Zip Code , TX 75214 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date | Full name of contributor | out-of-state PAC | C (ID#:) | Amount of contribution (\$) |
| 12/13/2022 | Jane Weempe | | | 1000.00 |
| Officeholder Contribution | Contributor address; 1316 W. Canterbury Ct. | Citv: | State; Zip Code , TX 75208 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date 12/29/2022 | Full name of contributor Harold Ginsburg | out-of-state PAC | C (ID#:) | Amount of contribution (\$) 1000.00 |
| Officeholder Contribution | Contributor address; 2610 Fairmount St. | City; Dallas, | State: Zip Code , TX 75201 | |
| | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |

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SCHEDULE A1

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| The | Instruction Guide explains how to complete this | form. | 1 Total pages Schedule A1: 32 of 34 |
|------------------------------|--|-----------------------------|---------------------------------------|
| 2 FILER NAME Chad A West | | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor out-of-state PAC | (ID#:) | 7 Amount of contribution (\$) |
| 12/29/2022 | Barry Hancock | | 949.70 |
| Officeholder Contribution | 6 Contributor address; City; | State; Zip Code TX 75205 | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instruc | tions) |
| Date | Full name of contributor | (ID#:) | Amount of contribution (\$) |
| 12/31/2022 | Carl Anderson | | 1000.00 |
| Officeholder Contribution | Contributor address; City; | State; Zip Code TX 75204 | |
| Principal occup | pation / Job title (See Instructions) | Employer (See Instruct | tions) |
| Date | Full name of contributor | (ID#:) | Amount of contribution (\$) |
| 12/31/2022 | Stephen Schenkel | | 250.00 |
| Campaign Contribution | Contributor address; City; 3610 Turtle Creek Blvd. Suite 12B Dallas, | State: Zip Code | |
| Principal occup | pation / Job title (See Instructions) | Employer (See Instruc | tions) |
| Date 12/31/2022 | Craig Schenkel | (ID#:) | Amount of contribution (\$) 1000.00 |
| Campaign Contribution | Contributor address; City; 3105 Stanford Avenue Dallas, | State: Zip Code TX 75225 | |
| Principal occup | pation / Job title (See Instructions) | Employer (See Instruc | tions) |
| | | | |

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SCHEDULE A1

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| The | Instruction Guide explains how to complete this | form. | 1 Total pages Schedule A1: 33 of 34 |
|------------------------------|--|-------------------------------------|---------------------------------------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | | | |
| 4 Date | 5 Full name of contributor out-of-state PAC (| (ID#:) | 7 Amount of contribution (\$) |
| 12/31/2022 | Joanna Lindegaard | | 4000.00 |
| Officeholder Contribution | 6 Contributor address; City; 133 E De La Guerra St Suite 42 Santa Ba | State; Zip Code arbara, CA 93101 | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instruct | ions) |
| Date | Full name of contributor uut-of-state PAC (| (ID#:) | Amount of contribution (\$) |
| 12/31/2022 | Joanna Lindegaard | | 1000.00 |
| Campaign Contribution | Contributor address; City; | State; Zip Code arbara, CA 93101 | |
| Principal осси | pation / Job title (See Instructions) | Employer (See Instructi | ions) |
| Date | Full name of contributor ut-of-state PAC (| (ID#:) | Amount of contribution (\$) |
| 12/31/2022 | Craig Roberts | | 250.00 |
| Campaign Contribution | Contributor address; City; 3306 Stanford Avenue Dallas, 7 | State; Zip Code ГХ 75205 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruct | ions) |
| Date 12/31/2022 | Full name of contributor | (ID#:) | Amount of contribution (\$) 500.00 |
| Campaign Contribution | Contributor address; City; 614 N Bishop Dallas, 7 | State: Zip Code ГХ 75208 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruct | ions) |
| | | | |

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SCHEDULE A1

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| The | Instruction Guide explains how | to complete this | s form. | 1 Total pages Schedule A1: 34 of 34 |
|--------------------------|---|------------------|-------------------------------|---------------------------------------|
| 2 FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| Chad A West | | | | |
| 4 Date | 5 Full name of contributor | out-of-state PAC | C (ID#:) | 7 Amount of contribution (\$) |
| 12/31/2022 | Jim Pitts | | | 1000.00 |
| Campaign Contribution | 6 Contributor address; 3525 Turtle Creek Blvd. | City; Dallas | State; Zip Code , TX 75219 | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instruc | tions) |
| Date | Full name of contributor | out-of-state PAC | C (ID#:) | Amount of contribution (\$) |
| 12/31/2022 | Trammell Crow | | | 1000.00 |
| Campaign Contribution | Contributor address; 4000 Rock Creek Drive | City; | State; Zip Code , TX 75204 | |
| Principal occup | ation / Job title (See Instructions) | | Employer (See Instruct | tions) |
| Date | Full name of contributor | out-of-state PAC | C (ID#:) | Amount of contribution (\$) |
| 08/22/2022 | SWA Freedom Fund PAC | | | 1500.00 |
| Campaign Contribution | Contributor address; P.O. Box 36611 | City; | State; Zip Code , TX 75235 | |
| Principal occup | pation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date | Full name of contributor | out-of-state PAC | C (ID#:) | Amount of contribution (\$) |
| | Contributor address; | City; | State; Zip Code | |
| Principal occup | eation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| | | | | |

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|---|---|----------------------|-----------------------------|--------------------|
| 1 Total pages Schedule F1: 1 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 07/20/2022 | Legal Hospice of Texas | | | |
| 6 Amount (\$) 1000.00 Officeholder Funds for Officeholder Expenditures | 7 Payee address; 1825 Market Center Boulevard Suite 550 Dallas, TX 75207 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Donation | Donation | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 07/20/2022 | Container Store | | | |
| Amount (\$) 126.54 | Payee address; 7700 W Northwest HW Dallas, TX 75225 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | | T 5 | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Office Overhead | Storage Containers | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| | | | | |
| 07/21/2022 | Ascension Coffee | | | |
| Amount (\$) 38.48 | Payee address; 200 Crescent Court Suite 40 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | Dallas, TX 75201 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting re Housing I | Policy | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austii | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | Other (enter a category not listed above) | |
|--|--|---------------------|---|----|
| 1 Total pages Schedule F1: 2 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers | s) |
| 4 Date | 5 Payee name | | | |
| 07/21/2022 | Central Computer & Networks | | | |
| 6 Amount (\$) 238.15 | 7 Payee address; P.O. Box 860337 Plano, TX 75086 | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Office Overhead | Email Service Expen | se | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held | |
| Date | Payee name | | | |
| 07/21/2022 | Roots Market | | | |
| Amount (\$) 76.73 | Payee address; | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | 4164 N HW 75 Dallas, TX 75204 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Gift | Gift for event host | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held | |
| Date | Payee name | | | |
| 07/25/2022 | Enos Pizza | | | |
| Amount (\$) 25.65 | Payee address; 407 N Bishop Avenue Dallas, TX 75208 | City; | State; Zip Code | |
| Officeholder Funds for Officeholder Expenditures | 407 N Bishop Avenue Danas, 1A 75206 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Lunch with neighbor | hood president | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | Other (enter a category not listed above) |
|--|--|----------------------|---|
| 1 Total pages Schedule F1: 3 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 07/25/2022 | Round Up Saloon | | |
| 6 Amount (\$) 36.00 | 7 Payee address; 3912 Cedar Springs RoaDallas, TX 75219 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF | Beverage expense | Meeting with support | ter |
| EXPENDITURE | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 07/25/2022 | Eggsellent Café | | |
| Amount (\$) 80.58 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 4218 Lemmon Avenue Dallas, TX 75219 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Food expense | Breakfast with donor | rs |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 07/25/2022 | Ame | | |
| Amount (\$) 123.10 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 418 N Bishop Avenue Dallas, TX 75208 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Gift | Gift for event host | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | outer (errier a satisge | ., |
|---|--|--|----------------------------|--------------------|
| 1 Total pages Schedule F1: 4 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date 07/25/2022 | 5 Payee name Lowes | | | |
| 6 Amount (\$) 260.95 Campaign Funds for Campaign Expenditures | 7 Payee address; 8520 S Hampton Road Dallas, TX 75228 | City; | State; | Zip Code |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead | (b) Description Shelving for sign stor | rage | |
| | (C) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 07/25/2022 | Chad West | | | |
| Amount (\$) 97.71 Campaign Funds for Campaign Expenditures | Payee address; 810 North Bishop AvenuĐallas, TX 75208 | City; | State; | Zip Code |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Meal Reimbursement | t for meetings | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 07/25/2022 | Oak Cliff Chamber of Commerce | | | |
| Amount (\$) 500.00 Officeholder Funds for Officeholder Expenditures | Payee address; 400 South Zang Boulevard Suite P Dallas, TX 75208 | City; | State; | Zip Code |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Donation | Corn Hole Tourname | nt | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to o | complete this form. | , - | , |
|---|--|-----------------------|----------------------------|----------------------|
| 1 Total pages Schedule F1: 5 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethic | s Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 07/26/2022 | Container Store | | | |
| 6 Amount (\$) 250.41 Campaign Funds for Campaign Expenditures | 7 Payee address; 7700 W Northwest HW Dallas, TX 75225 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Office Overhead | Storage Containers | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | g expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 07/28/2022 | CVS Pharmacy | | | |
| Amount (\$) 63.29 Campaign Funds for | Payee address; 108 W Davis Street Dallas, TX 75203 | City; | State; | Zip Code |
| Campaign Expenditures | | Danamintian | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Office Overhead | Greeting Cards | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | gexpense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 07/29/2022 | Taco y Vino | | | |
| Amount (\$) 100.00 | Payee address; 213 W 8th Street Dallas, TX 75208 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Gift | Gift Card for Event F | Host | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | |
|---|--|-----------------------|---------------------------------------|
| 1 Total pages Schedule F1: 6 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 07/29/2022 | Society By JV | | |
| 6 Amount (\$) 192.69 Campaign Funds for Campaign Expenditures | 7 Payee address; 403 N Bishop Avenue Dallas, TX 75208 | City; | State; Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Gift | Gifts for Event Hosts | s |
| | (C) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OI | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 07/29/2022 | Paradiso | | |
| Amount (\$) 200.00 | Payee address; 308 N Bishop Avenue Dallas, TX 75208 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | | D : # | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Gift | Gift Cards for Volunt | teers |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| | | | |
| 07/29/2022 | Taco y Vino | | |
| Amount (\$) 205.00 | Payee address; 213 W 8th Street Dallas, TX 75208 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 213 W our succet Danas, 174 / 3200 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Food expense | Volunteer Meeting | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austii | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | |
|---|--|--------------------------------------|---------------------------------------|
| 1 Total pages Schedule F1: 7 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 07/29/2022 | Dybou LLC | | |
| 6 Amount (\$) 455.89 Campaign Funds for Campaign Expenditures | 7 Payee address; 4514 Travis Street Dallas, TX 75205 | City; | State; Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Office Overhead | Website Revisions | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Aust | in, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 07/29/2022 | Maria Salazar | | |
| Amount (\$) 572.00 | Payee address; 2605 East Ledbetter DrivDallas, TX 75216 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Contract Labor | Campaign Office Cleaning - quarterly | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| | | | |
| 08/01/2022 | Katy Seitzler | | |
| Amount (\$) 87.50 | Payee address; 217 Sycamore Creek Roadllen, TX 75002 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 217 Sycamore Creek Roadnen, 12 75002 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Contract Labor | Email Marketing and | l Campaign Communications |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | |
|---|--|---------------------|---------------------------------------|
| 1 Total pages Schedule F1: 8 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 08/01/2022 | Eggsellent Café | | |
| 6 Amount (\$) 111.24 Campaign Funds for Campaign Expenditures | 7 Payee address; 4218 Lemmon Avenue Dallas, TX 75219 | City; | State; Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting with suppor | ters |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/O | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 08/01/2022 | DirtFlowers | | |
| Amount (\$) 162.38 | Payee address; 417 N Bishop Avenue Dallas, TX 75208 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | | T 5 | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Gift | Flowers for funeral | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| | | | |
| 08/01/2022 | Dallas County Democratic Party | | |
| Amount (\$) 250.00 | Payee address; 1414 N Washington Ave f o al las, TX 75204 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | TTTTT Washington TTO Later 18, 121 / 520 T | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Donation | Donation for event | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | |
|--|--|---------------------|---------------------------------------|
| 1 Total pages Schedule F1: 9 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 08/01/2022 | American Airlines | | |
| 6 Amount (\$) 749.60 Campaign Funds for Campaign Expenditures | 7 Payee address; 1 Skyview Drive Euless, TX 76040 | City; | State; Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Travel Out of District | Flight Expense | |
| | (C) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OI | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 08/02/2022 | VRBO | | |
| Amount (\$) 2100.50 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 11800 Domain Blvd Suite 300 Austin, TX 78759 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Travel Out of District | Lodging Expense | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| | | | |
| 08/03/2022 | Glorias Restaurant | | |
| Amount (\$) 74.90 | Payee address; | City; | State; Zip Code |
| Officeholder Funds for Officeholder Expenditures | 600 N Bishop Avenue Dallas, TX 75208 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting with Chamb | per President |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | Other (effici a category not listed a | above) |
|--|--|---------------------|---------------------------------------|------------|
| 1 Total pages Schedule F1: $10 \text{ of } 70$ | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission | on Filers) |
| 4 Date | 5 Payee name | | | |
| 08/03/2022 | Sketches of Spain | | | |
| 6 Amount (\$) 90.78 | 7 Payee address; 321 N Zang Blvd Dallas, TX 75208 | City; | State; Zip Co | de |
| Officeholder Funds for Officeholder Expenditures | | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE | Food expense | Meeting with Housin | g Advocates | |
| OF EXPENDITURE | | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held | d |
| Date | Payee name | | | |
| 08/04/2022 | Green Mountain Energy | | | |
| Amount (\$) 506.31 | Payee address; | City; | State; Zip Co | de |
| Campaign Funds for | P.O. Box 121233 Dallas, TX 75312 | | | |
| Campaign Expenditures | | _ | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF | Advertising Expense | Billboard | | |
| EXPENDITURE | | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held | d |
| Date | Payee name | | | |
| | | | | |
| 08/09/2022 | Central Computer & Networks | | | |
| Amount (\$) 340.98 | Payee address; P.O. Box 860337 Plano, TX 75086 | City; | State; Zip Co | de |
| Campaign Funds for | 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1. | | | |
| Campaign Expenditures | | 1 | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Office Overhead | Computer Conversion | n | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austii | n, TX, officeholder living expense | |
| Complete ONLY if direct | Candidate / Officeholder name | Office sought | Office he | ld |
| expenditure to benefit C/OF | | | | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | DED | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | , |
|--|--|------------------------|----------------------------|----------------------|
| 1 Total pages Schedule F1: 11 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethic | s Commission Filers) |
| 4 Date | 5 Payee name | | I | |
| 08/09/2022 | DEX Imaging | | | |
| 6 Amount (\$) 98.86 Campaign Funds for Campaign Expenditures | 7 Payee address; P.O. Box 17299 Clearwater, FL 33762 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Office Overhead | Printer/Copier Service | ce | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder livin | g expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 08/09/2022 | Chad West | | | |
| Amount (\$) 174.42 Campaign Funds for | Payee address; 810 North Bishop AvenuĐallas, TX 75208 | City; | State; | Zip Code |
| Campaign Expenditures | Cotogony (Oss Ostansija listadataka tarafakiran kada) | Decembries | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting Expense Rei | imbursement | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder livin | g expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 08/11/2022 | Ascension Coffee | | | |
| Amount (\$) 19.24 Campaign Funds for | Payee address; 7700 W Northwest HW Dallas, TX 75225 | City; | State; | Zip Code |
| Campaign Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Working Breakfast w | vith Volunteer | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder livinç | g expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to o | complete this form. | outer (enter a satisge | ., |
|--|---|----------------------|-----------------------------|--------------------|
| 1 Total pages Schedule F1: 12 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | I | |
| 08/11/2022 | Express Shop | | | |
| 6 Amount (\$) 32.90 Campaign Funds for | 7 Payee address; 200 Crescent Court Suite 40 Dallas, TX 75201 | City; | State; | Zip Code |
| Campaign Expenditures | Dullus, 171 / 3201 | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE | Gift | Greeting Cards | | |
| OF EXPENDITURE | | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 08/12/2022 | Target | | | |
| Amount (\$) 287.77 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 735 N HW 67 Cedar Hill, TX 75104 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Donation | Supplies for Youth S | ports Donation | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 00/40/2000 | GL 133 | | | |
| 08/12/2022 | Chad West | 0'' | 01.1 | 7' 0 1 |
| Amount (\$) 300.00 | Payee address; 810 North Bishop AvenuÐallas, TX 75208 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Contract Labor | Block Walking Reim | bursement | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Candidate/Officeholder/Politica | al Committee Legal Services Salaries/ | Wages/Contract Labor | Other (enter a category not listed above) |
|---|--|-----------------------|---|
| Credit Card Payment | The Instruction Guide explains how to | complete this form. | |
| 1 Total pages Schedule F1: 13 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 08/12/2022 | The 23rd Senatorial District | | |
| 6 Amount (\$) 20.00 | 7 Payee address; | City; | State; Zip Code |
| | 10432 High Hollows Drive Suite 141 | | |
| Campaign Funds for Campaign Expenditures | Dallas, TX 75230 | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE | Fees | Renewal Membership | Dues |
| OF EXPENDITURE | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living expense |
| 9 Complete ONLY if direct | Candidate / Officeholder name | Office sought | Office held |
| expenditure to benefit C/OF | | •g | |
| Date | Payee name | | |
| | | | |
| 08/15/2022 | Chad West | | |
| Amount (\$) 380.00 | Payee address; | City; | State; Zip Code |
| | 810 North Bishop AvenuDallas, TX 75208 | | |
| Campaign Funds for Campaign Expenditures | | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE | Contract Labor | Block Walking Reim | bursement |
| OF EXPENDITURE | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| | , | | |
| 08/16/2022 | Lambda Legal | | |
| Amount (\$) 1750.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for | 120 Wall Street Suite 19th New York, NY 10005 | | |
| Campaign Expenditures | , | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE | Donation | Liberty Circle Member | ership |
| OF EXPENDITURE | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living expense |
| Complete ONLY if direct | Candidate / Officeholder name | Office sought | Office held |
| expenditure to benefit C/OF | | J · | |
| | ATTACH ADDITIONAL COPIES OF THIS | S SCHEDULE AS NEE | :DED |
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | |
|--|--|----------------------|---------------------------------------|
| 1 Total pages Schedule F1: 14 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 08/16/2022 | Maria Salzar | | |
| 6 Amount (\$) 300.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 2605 East Ledbetter DrivDallas, TX 75216 | City; | State; Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Contract Labor | Sign Storage and Cle | eaning |
| | (C) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 08/15/2022 | North Oak Cliff Greenspace Inc | | |
| Amount (\$) 1250.00 | Payee address; 1005 North Montclair Avenue | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | Dallas, TX 75208 | T | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Gifts | Golf Tournament Spe | onsor |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 08/17/2022 | Ascension Coffee | | |
| Amount (\$) 26.93 | Payee address; | City; | State; Zip Code |
| Officeholder Funds for Officeholder Expenditures | 200 Crescent Court Suite 40 Dallas, TX 75201 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting with City St | aff |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|---|---|---------------------------------------|------------------------------|--------------------|
| 1 Total pages Schedule F1: 15 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 08/19/2022 | Color Me Empowered | | | |
| 6 Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 2101 West Clarendon Dr Dæ llas, TX 75208 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Donation | Sponsorship for Childrens Programming | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | (| Office held |
| Date | Payee name | | | |
| 08/19/2022 | Wholefoods | | | |
| Amount (\$) 75.52 | Payee address; 4100 Lomo Alto Drive Dallas, TX 75205 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Gifts | Cookies and snacks f | or Security Team | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | C | Office held |
| Date | Payee name | | | |
| 08/19/2022 | Vivint | | | |
| Amount (\$) 64.38 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 62992 Collection Drive Chicago, IL 60693 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Office Overhead | Office Alarm | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living e | avnansa |
| Operation Objects in the control of | Candidate / Officeholder name | | | Office held |
| Complete ONLY if direct expenditure to benefit C/OF | | Office sought | | Onice neid |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | DED | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|---|--|---------------------|----------------------------|----------------------|
| 1 Total pages Schedule F1: 16 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | s Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 08/22/2022 | Benny Guzman | | | |
| 6 Amount (\$) 210.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 306 S Montreal Avenue Dallas, TX 75208 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Contract Labor | Wages | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 08/22/2022 | Oak Cliff Brewing | | | |
| Amount (\$) 20.07 Campaign Funds for Campaign Expenditures | Payee address; 1300 S Polk Street Suite 222 Dallas, TX 75228 | City; | State; | Zip Code |
| Campaign Expenditures | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Beverage expense | Meeting with Neighb | oors | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 08/22/2022 | Qualigraphics | | | |
| Amount (\$) 179.18 Campaign Funds for Campaign Expenditures | Payee address; 934 Stevens Woods CourDallas, TX 75208 | City; | State; | Zip Code |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Advertising Expense | Postcards | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austii | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | Other (enter a category fr | ot listed above) |
|--|--|---------------------|--------------------------------|-------------------|
| 1 Total pages Schedule F1: 17 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Co | ommission Filers) |
| 4 Date | 5 Payee name | | | |
| 08/22/2022 | Oak Cliff Lions Club | | | |
| 6 Amount (\$) 50.00 Campaign Funds for | 7 Payee address; P.O. Box 4445 Dallas, TX 75208 | City; | State; | Zip Code |
| Campaign Expenditures | | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Advertising Expense | Membership Dues | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living exp | ense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Off | ïce held |
| Date | Payee name | | | |
| 08/22/2022 | Oak Cliff Chamber of Commerce | | | |
| Amount (\$) 1000.00 | Payee address; | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | 400 South Zang Boulevard Suite C-59 Dallas, TX 75208 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Donation | Sponsorship | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living exp | ense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Off | ice held |
| Date | Payee name | | | |
| 08/22/2022 | Perlas Seafood | | | |
| Amount (\$) 266.45 | Payee address; 1400 S Congress Ave Austin, TX 78704 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 1400 3 Congress Ave Austin, 1A 78704 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Austin | Donor | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living exp | ense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Of | fice held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | DED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| , | The Instruction Guide explains how to | complete this form. | |
|--|--|--------------------------------|---------------------------------------|
| 1 Total pages Schedule F1: 18 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 08/23/2022 | 5 Payee name QT | | |
| 6 Amount (\$) 11.92 Campaign Funds for Campaign Expenditures | 7 Payee address; 2350 S New Road Waco, TX 78221 | City; | State; Zip Code |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel Out of District | (b) Description Travel Expense | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 08/23/2022 Amount (\$) 63.43 | QT Payee address; 2350 S New Road Waco, TX 78221 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 2530 S New Road Wato, 1A 76221 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Travel Out of District | Travel Expense | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 08/23/2022 | Tom Thumb | | |
| Amount (\$) 87.72 Officeholder Funds for | Payee address; 2380 N Field Street Dallas, TX 75201 | City; | State; Zip Code |
| Officeholder Expenditures | | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Office Overhead | Plants for Council Of | fice |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|--|--|----------------------|-----------------------------|----------------------|
| 1 Total pages Schedule F1: 19 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | s Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 08/23/2022 | Fairmont | | | |
| 6 Amount (\$) 1211.11 Campaign Funds for Campaign Expenditures | 7 Payee address; 101 Red River Street Austin, TX 78701 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Travel Out of District | Travel Expense | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 08/24/2022 | R+D | | | |
| Amount (\$) 177.22 | Payee address; 8300 Preston Center PlazDallas, TX 75110 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Potenti | al Donor | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| | - | | | |
| 08/25/2022 | Mailchimp | | | |
| Amount (\$) 100.46 | Payee address; 675 Ponce De Leon Ave Atlanta, GA 30308 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 073 Tolice Be Leon Ave Adama, GA 30300 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF | Advertising Expense | Marketing | | |
| EXPENDITURE | | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | |
|---|--|----------------------|---------------------------------------|
| 1 Total pages Schedule F1: 20 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 08/25/2022 | Glorias Restaurant | | |
| 6 Amount (\$) 109.85 Campaign Funds for Campaign Expenditures | 7 Payee address; 600 N Bishop Avenue Dallas, TX 75208 | City; | State; Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Donor | |
| | (C) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OI | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 08/26/2022 | Signs Manufacturing | | |
| Amount (\$) 744.11 | Payee address; 4610 Mint Way Dallas, TX 75236 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Advertising Expense | Billboard | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| | | | |
| 08/26/2022 | Total Wine | | |
| Amount (\$) 106.05 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 428 E Farm to Market Road 1382 Cedar Hill, TX 75104 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Gifts | Gifts for Supporters | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDUI F AS NEF | EDED |
| | ALIAGIADDITIONAL COLIEC OF THIC | . Joine Doll At Mel | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | , | | |
|--|--|----------------------|----------------------------|------------------------|--|--|
| 1 Total pages Schedule F1: 21 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethic | s Commission Filers) | | |
| 4 Date | 5 Payee name | | | | | |
| 08/29/2022 | Eggsellent Café | | | | | |
| 6 Amount (\$) 48.74 Campaign Funds for Campaign Expenditures | 7 Payee address; 4218 Lemmon Avenue Dallas, TX 75219 | City; | State; | Zip Code | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | | | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting with Finance | e Advisor | | | |
| | (C) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | cholder living expense | | |
| 9 Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | | Office held | | |
| Date | Payee name | | | | | |
| 08/29/2022 | Glorias Restaurant | | | | | |
| Amount (\$) 81.11 | Payee address; | City; | State; | Zip Code | | |
| Officeholder Funds for Officeholder Expenditures | 600 N Bishop Avenue Dallas, TX 75208 | | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | | | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting with Housin | g Policy Advisor | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | g expense | | |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held | | |
| Date | Payee name | | | | | |
| 08/29/2022 | Virgin Hotel | | | | | |
| Amount (\$) 179.39 | Payee address; 1445 Turtle Creek Blvd Dallas, TX 75207 | City; | State; | Zip Code | | |
| Campaign Funds for Campaign Expenditures | 1443 Turue Creek Bivd Danas, 1X /320/ | | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | | | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Potenti | al Donors | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held | | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | | | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to e | complete this form. | Other (enter a category not listed above) | |
|--|--|----------------------|---|----|
| 1 Total pages Schedule F1: 22 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers | 3) |
| 4 Date | 5 Payee name | | | |
| 08/29/2022 | Dominique Torres for Judge | | | |
| 6 Amount (\$) 250.00 | 7 Payee address; | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | 1910 Pacific Avenue Suite 5070 Dallas, TX 75201 | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE | Donation | Campaign Contributi | on | |
| OF EXPENDITURE | | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held | |
| Date | Payee name | | | |
| 08/30/2022 | Tjs Fish Market | | | |
| Amount (\$) 75.26 | Payee address; | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | 4212 Oak Lawn Avenue Dallas, TX 75219 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Potenti | al Donor | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held | |
| Date | Payee name | | | |
| | | | | |
| 08/30/2022 | Dallas House of Flowers | | | |
| Amount (\$) 254.58 | Payee address; 2410 W Red Bird Lane Dallas, TX 75237 | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | 2410 W Red Bild Laile Ballas, 17/73237 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Gifts | Flowers for funeral | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|---|--|-------------------------|-----------------------------|--------------------|
| 1 Total pages Schedule F1: 23 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 08/30/2022 | Shutterfly | | | |
| 6 Amount (\$) 304.51 Campaign Funds for Campaign Expenditures | 7 Payee address; 2800 Bridge Parkway Redwood City, CA 94065 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Printing Expense | Print Materials - Stati | ionary | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 08/31/2022 | Tjs Fish Market | | | |
| Amount (\$) 74.03 | Payee address; 4212 Oak Lawn Avenue Dallas, TX 75219 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Potentia | al Donor | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | (| Office held |
| Date | Payee name | | | |
| | | | | |
| 09/01/2022 | Gogoa | | | |
| Amount (\$) 19.00 | Payee address; 3606 S Tyler Street Dallas, TX 75224 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | Jamas, 17, 73224 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF | Travel Out of District | Wifi Expense | | |
| EXPENDITURE | | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to o | complete this form. | outer (enter a satisge | ., |
|---|--|---------------------|----------------------------|--------------------|
| 1 Total pages Schedule F1: 24 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | ı | | |
| 09/01/2022 | The Dallas Assembly | | | |
| 6 Amount (\$) 51.50 Campaign Funds for Campaign Expenditures | 7 Payee address; 12900 Preston Road Suite 1210 Dallas, TX 75230 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE | Fees | Event Expense | | |
| OF EXPENDITURE | | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 09/02/2022 | Viasat In-Flight | | | |
| Amount (\$) 19.00 | Payee address; | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | 3606 S Tyler Street Dallas, TX 75224 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Travel Out of District | Wifi Expense | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 00/02/2022 | Corre | | | |
| 09/02/2022 Amount (\$) 10.00 | Gogoa Payee address; | City; | Ctata | Zip Code |
| 19.00 | 3606 S Tyler Street Dallas, TX 75224 | City, | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Travel Out of District | Wifi Expense | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living | expense |
| Complete ONLY if direct | Candidate / Officeholder name | Office sought | | Office held |
| expenditure to benefit C/OF | 1 | | | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | DED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|--|--|---------------------|-------------------------------|--------------------|
| 1 Total pages Schedule F1: 25 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 09/06/2022 | Murray Food | | | |
| 6 Amount (\$) 55.20 Campaign Funds for Campaign Expenditures | 7 Payee address; 24550 Overseas HW Summerland, FL 33042 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Travel Out of District | Travel Expense | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living e | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | C | Office held |
| Date | Payee name | | | |
| 09/06/2022 | Katy Seitzler | | | |
| Amount (\$) 175.00 Campaign Funds for | Payee address; 217 Sycamore Creek Roallen, TX 75002 | City; | State; | Zip Code |
| Campaign Expenditures | | 5 | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Contract Labor | Email Marketing and | l Campaign Commun | ications |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living e | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | C | Office held |
| Date | Payee name | | | |
| | - | | | |
| 09/06/2022 | Venture Out | | | |
| Amount (\$) 63.87 | Payee address; 701 Spanish Main Drive Cudjoe Key, FL 33042 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 701 Spanish Main Drive Cudjoe Key, FL 33042 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Travel Out of District | Travel Expense | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living e | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | |
|---|--|----------------------|---------------------------------------|
| 1 Total pages Schedule F1: 26 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 09/06/2022 | Tonio Seafood | | |
| 6 Amount (\$) 122.63 Campaign Funds for Campaign Expenditures | 7 Payee address; 25165 Overseas HW Summerland, FL 33042 | City; | State; Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Potenti | ial Donor |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 09/06/2022 | Tonio Seafood | | |
| Amount (\$) 156.69 | Payee address; 25165 Overseas HW Summerland, FL 33042 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 0-1 | Description | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Potenti | ial Donor |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| | | | |
| 08/30/2022 | SPCA of Texas | | |
| Amount (\$) 800.00 | Payee address; 2400 Lone Star Drive Dallas, TX 75212 | City; | State; Zip Code |
| Officeholder Funds for Officeholder Expenditures | 2400 Boile Star Bilve Banas, 114 /3212 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Donation | Fur Ball Sponsorship | 5 |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | Other (enter a category | Thot listed above) |
|--|--|---------------------|------------------------------|--------------------|
| 1 Total pages Schedule F1: 27 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics (| Commission Filers) |
| 4 Date | 5 Payee name | | <u> </u> | |
| 09/07/2022 | Advocate Publish | | | |
| 6 Amount (\$) 507.00 | 7 Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 6301 Gaston Avenue Suite 820 Dallas, TX 75214 | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Advertising Expense | Digital Advertising | | |
| | (C) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living e | xpense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | C | Office held |
| Date | Payee name | | | |
| 09/09/2022 | Viasat In-Flight | | | |
| Amount (\$) 19.00 | Payee address; | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | 3606 S Tyler Street Dallas, TX 75224 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Travel Out of District | Wifi Expense | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living e | xpense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | C | ffice held |
| Date | Payee name | | | |
| 09/09/2022 | Twist | | | |
| Amount (\$) 126.00 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 1057 Washington AvenuMiami, FL 33139 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with donor | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living e | xpense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | (| Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| 09/09/2022 Baoli Amount (\$) 200.17 Campaign Funds for Campaign Expenditures PURPOSE OF EXPENDITURE Baoli 7 Payee address; 1906 Collins Aven a) Category (See Category) Fundraising Solicit | egories listed at the top of this schedule) | City; | Filer ID (Ethics | Commission Filers) |
|--|---|--|------------------------|-----------------------|
| 09/09/2022 Baoli 6 Amount (\$) 200.17 Campaign Funds for Campaign Expenditures 8 PURPOSE OF EXPENDITURE Baoli 7 Payee address; 1906 Collins Aven (a) Category (See Cate Fundraising Solicit | egories listed at the top of this schedule) | | State; | Zip Code |
| 7 Payee address; 1906 Collins Aven Campaign Funds for Campaign Expenditures 8 (a) Category (See Cate Of EXPENDITURE | egories listed at the top of this schedule) | | State; | Zip Code |
| 200.17 Campaign Funds for Campaign Expenditures 8 PURPOSE OF EXPENDITURE 1906 Collins Aven 1906 Collins Aven Fundraising Solicit | egories listed at the top of this schedule) | | State; | Zip Code |
| Campaign Expenditures 8 Campaign Expenditures (a) Category (See Categ | | (b) Description | | |
| PURPOSE Fundraising Solicit OF EXPENDITURE | | (b) Description | | |
| OF EXPENDITURE | ation | , , | | |
| EXPENDITURE | | Dinner with donor | | |
| (5) | | | | |
| (c) Check if tra | vel outside of Texas. Complete Schedule T. | Check if Austin, TX | K, officeholder living | expense |
| 9 Complete ONLY if direct candidate / Offi expenditure to benefit C/OH | ceholder name | Office sought | | Office held |
| Date Payee name | | | | |
| 09/09/2022 Jaynie Schultz Can | npaign | | | |
| Amount (\$) Payee address; | | City; | State; | Zip Code |
| 11222 St Michaels | DriveDallas, TX 75230 | | | |
| Campaign Funds for Campaign Expenditures | | | | |
| Category (See Cate | gories listed at the top of this schedule) | Description | | |
| PURPOSE Contribution OF | | Campaign Contribution | | |
| EXPENDITURE | | | | |
| Check if tra | vel outside of Texas. Complete Schedule T. | Check if Austin, TX | (, officeholder living | |
| Complete ONLY if direct Candidate / Offi | scholder name | | , | expense |
| expenditure to benefit C/OH | cenoider Haitle | Office sought | ,g | Office held |
| expenditure to benefit C/OH Date Payee name | SCHOIDEL HATHE | Office sought | | |
| Date Payee name | | Office sought | , | |
| Date Payee name 09/09/2022 The Kessler Schoo | | | | Office held |
| Date Payee name | | Office sought City; | State; | |
| Date Payee name 09/09/2022 The Kessler Schoo Amount (\$) 500.00 Payee address; 1215 Turner Avenu Campaign Funds for | I | | | Office held |
| Date Payee name 09/09/2022 The Kessler Schoo Amount (\$) 500.00 Payee address; 1215 Turner Avenu Campaign Funds for Campaign Expenditures | ue Dallas, TX 75208 | City; | | Office held |
| Date Payee name 09/09/2022 The Kessler Schoo Amount (\$) 500.00 Payee address; 1215 Turner Avenu Campaign Funds for Campaign Expenditures Category (See Cate | | City; Description | | Office held |
| Date Payee name 09/09/2022 The Kessler Schoo Amount (\$) 500.00 Payee address; 1215 Turner Avenu Campaign Funds for Campaign Expenditures Category (See Cate PURPOSE Donation | ue Dallas, TX 75208 | City; | | Office held |
| Date Payee name 09/09/2022 The Kessler Schoo Amount (\$) 500.00 Payee address; 1215 Turner Avenu Campaign Funds for Campaign Expenditures Category (See Cate | ue Dallas, TX 75208 | City; Description | | Office held |
| Date O9/09/2022 The Kessler School Amount (\$) 500.00 Campaign Funds for Campaign Expenditures PURPOSE OF EXPENDITURE Payee address; 1215 Turner Avenu Category (See Cate Donation | ue Dallas, TX 75208 | City; Description | State; | Office held Zip Code |
| Date O9/09/2022 The Kessler Schoo Amount (\$) 500.00 Campaign Funds for Campaign Expenditures Purpose OF EXPENDITURE Candidate / Off Candidate / Off | pe Dallas, TX 75208 gories listed at the top of this schedule) vel outside of Texas. Complete Schedule T. | City; Description Donation | State; | Office held Zip Code |
| Date O9/09/2022 The Kessler Schoo Amount (\$) 500.00 Campaign Funds for Campaign Expenditures Purpose OF EXPENDITURE Payee address; 1215 Turner Avent Category (See Cate Donation Check if tra | pe Dallas, TX 75208 gories listed at the top of this schedule) vel outside of Texas. Complete Schedule T. | City; Description Donation Check if Austin, TX | State; | Office held Zip Code |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|---|--|-----------------------|----------------------------|--------------------|
| 1 Total pages Schedule F1: 29 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 09/09/2022 | Chad West | | | |
| 6 Amount (\$) 450.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 810 North Bishop AvenuĐallas, TX 75208 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Contract Labor | Reimbursement for L | abor | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 09/09/2022 | 1010 Partnership LLC | | | |
| Amount (\$) 532.05 Campaign Funds for | Payee address; 3606 South Tyler Street Dallas, TX 75224 | City; | State; | Zip Code |
| Campaign Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Donation | Reimbusement for sp | onsorship | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| | | | | |
| 09/09/2022 | Benny Guzman | | | |
| Amount (\$) 300.00 | Payee address; 306 South Montreal AvenDadlas, TX 75208 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Donation | Dallas Fire Rescue Sp | ponsor | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | DED | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to e | complete this form. | Other (enter a category not listed above) | |
|---|--|---------------------|---|---|
| 1 Total pages Schedule F1: 30 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers |) |
| 4 Date | 5 Payee name | | | |
| 09/09/2022 | The Lullaby House | | | |
| 6 Amount (\$) 200.00 | 7 Payee address; 7441 Marvin D Love Freeway Suite 201 | City; | State; Zip Code | |
| Officeholder Funds for Officeholder Expenditures | Dallas, TX 75237 | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE | Donation | Donation | | |
| OF EXPENDITURE | | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held | |
| Date | Payee name | | | |
| 09/12/2022 | Texas Equality PAC | | | |
| Amount (\$) 1000.00 | Payee address; | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | P.O. Box 2340 Austin, TX 78768 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF | Donation | Donation | | |
| EXPENDITURE | | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held | |
| Date | Payee name | | | |
| 09/12/2022 | Chad West | | | |
| Amount (\$) 79.31 | Payee address; 810 North Bishop AvenuĐallas, TX 75208 | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | 610 Notui Bishop AvenuBahas, 1A 73206 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Reimbursement for M | Meals | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|--|---|--|---------------------------------------|--|
| 1 Total pages Schedule F1: 31 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date | 5 Payee name | | | |
| 09/12/2022 | Hat Creek Burger | | | |
| 6 Amount (\$) 33.72 Campaign Funds for Campaign Expenditures | 7 Payee address; 8185 Walnut Hill Lane Dallas, TX 75231 | City; | State; Zip Code | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting with Suppor | ter | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | eT. Check if Austin, TX, officeholder living expense | | |
| 9 Complete ONLY if direct expenditure to benefit C/OI | Candidate / Officeholder name H | Office sought Office held | | |
| Date | Payee name | | | |
| 09/12/2022 | Cedar Springs Tap House | | | |
| Amount (\$) 77.08 | Payee address; 4123 Cedar Springs Road Suite 100 Dallas, TX 75219 | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | Danas, 1X 73219 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting with Suppor | ter | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held | |
| Date | Payee name | | | |
| | | | | |
| 09/14/2022 | The Network | | | |
| Amount (\$) 29.28 | Payee address; 331 Singleton Blvd Dallas, TX 75212 | City; | State; Zip Code | |
| Officeholder Funds for Officeholder Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting with Constit | uant | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held | |
| | ATTACH ADDITIONAL COPIES OF THIS | S SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to o | complete this form. | outer (errier a satisge | ., |
|--|--|-----------------------|----------------------------|--------------------|
| 1 Total pages Schedule F1: 32 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | <u> </u> | |
| 09/14/2022 | Tjs Fish Market | | | |
| 6 Amount (\$) 67.34 Campaign Funds for Campaign Expenditures | 7 Payee address; 4212 Oak Lawn Avenue Dallas, TX 75219 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE | Fundraising Solicitation | Meeting with Fundra | ising Organizer | |
| OF EXPENDITURE | | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 09/14/2022 | Oak Cliff Lions Club | | | |
| Amount (\$) 50.50 | Payee address; | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | P.O. Box 4445 Dallas, TX 75208 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Fees | Membership Dues | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 09/15/2022 | Taco y Vino | | | |
| Amount (\$) 38.85 | Payee address; 213 W 8th Street Dallas, TX 75208 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | 213 w our street Danas, 1X 73206 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting with Historic | c Preservationists | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | DED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|---|--|----------------------|----------------------------|----------------------|
| 1 Total pages Schedule F1: 33 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | s Commission Filers) |
| 4 Date | 5 Payee name | - | | |
| 09/16/2022 | Walgreens | | | |
| 6 Amount (\$) 188.25 Campaign Funds for Campaign Expenditures | 7 Payee address; 1306 N Beckley Ave Dallas, TX 75203 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Gifts | Cards and Gift Cards | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 09/19/2022 | Ascension Coffee | | | |
| Amount (\$) 19.88 | Payee address; | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | 200 Crescent Court Suite 40 Dallas, TX 75201 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting with Policy | Advisor | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| | | | | |
| 09/19/2022 | Benny Guzman | | | |
| Amount (\$) 200.00 | Payee address; 306 South Montreal Ave nbad las, TX 75208 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 500 South Montreal Aventalias, 174 75200 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF | Contract Labor | Mileage Reimbursem | ent | |
| EXPENDITURE | | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | DED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | Other (effici a category not listed above) |
|--|--|----------------------|--|
| 1 Total pages Schedule F1: 34 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 09/19/2022 | Katy Trail Ice House | | |
| 6 Amount (\$) 37.09 Campaign Funds for | 7 Payee address; 3127 Routh Street Dallas, TX 75219 | City; | State; Zip Code |
| Campaign Expenditures | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Potenti | al Donor |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 09/19/2022 | La Reunion | | |
| Amount (\$) 42.80 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 229 N Bishop Avenue Dallas, TX 75208 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Party C | Organizer |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 09/19/2022 | Xaman Café | | |
| Amount (\$) 78.23 | Payee address; 334 Jefferson Blvd Dallas, TX 75208 | City; | State; Zip Code |
| Officeholder Funds for Officeholder Expenditures | 554 Jenerson Bivu Danas, 17/3200 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting with Constit | ruants |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to o | complete this form. | Other (enter a category | / Not listed above) |
|--|--|-----------------------|------------------------------|---------------------|
| 1 Total pages Schedule F1: 35 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 09/19/2022 | Nova Dallas | | | |
| 6 Amount (\$) 102.27 Campaign Funds for | 7 Payee address; 1417 W Davis Street Dallas, TX 75208 | City; | State; | Zip Code |
| Campaign Expenditures | | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with potentia | al donor | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living e | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | C | Office held |
| Date | Payee name | | | |
| 09/19/2022 | Tjs Fish Market | | | |
| Amount (\$) 138.97 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 4212 Oak Lawn Avenue Dallas, TX 75219 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with confirm | ned donor | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living e | xpense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | C | Office held |
| Date | Payee name | | | |
| | | | | |
| 09/19/2022 | The Pour House | | | |
| Amount (\$) 194.89 | Payee address; 1300 W Davis Street Dallas, TX 75208 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 1300 W Davis Succe Danas, 1A 73200 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting with volunte | eers | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living e | xpense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | (| Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | |
|---|--|----------------------|---------------------------------------|
| 1 Total pages Schedule F1: 36 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 09/19/2022 | Turner House | | |
| $\begin{array}{c} \textbf{6} \ \text{Amount (\$)} \\ 250.00 \\ \\ \text{Officeholder Funds for} \\ \\ \text{Officeholder Expenditures} \end{array}$ | 7 Payee address; 401 N Rosemont Ave Dallas, TX 75208 | City; | State; Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Donation | Event Donation | |
| | (C) Check if travel outside of Texas. Complete Schedule T. | Check if Aust | in, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 09/21/2022 | Tjs Fish Market | | |
| Amount (\$) 35.65 | Payee address; 4212 Oak Lawn Avenue Dallas, TX 75219 | City; | State; Zip Code |
| Officeholder Funds for Officeholder Expenditures | | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Food expense | Lunch with Real Esta | ate Policy Advisor |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 09/21/2022 | ActBlue Rafael Anchia | | |
| Amount (\$) 250.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | P.O. Box 2910 Austin, TX 78768 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Contribution | Donation | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Other (enter a category not listed above)

| oreal card ayment | The Instruction Guide explains how to | complete this form. | | |
|--|--|---------------------|-----------------------------|--------------------|
| 1 Total pages Schedule F1: 37 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | 1 | |
| 09/22/2022 | Ascension Coffee | | | |
| 6 Amount (\$) 19.54 Campaign Funds for Campaign Expenditures | 7 Payee address; 200 Crescent Court Suite 40 Dallas, TX 75201 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Working lunch | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Aust | in, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 09/22/2022 | Parigi Restaurant | | | |
| Amount (\$) 133.25 | Payee address; 3311 Oak Lawn Avenue Dallas, TX 75219 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Thank you dinner wi | th retiring commission | oner |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | (| Office held |
| Date | Payee name | | | |
| | | | | |
| 09/22/2022 | Communities Foundation of Texas | | | |
| Amount (\$) 165.00 | Payee address; 5500 Caruth Haven LaneDallas, TX 75225 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | 3300 Catuul Haveil LaneDanas, 1A 73223 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Donation | Contribution | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | |
|--|---|-----------------------|---------------------------------------|
| 1 Total pages Schedule F1: 38 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | 1 | |
| 09/23/2022 | Ascension Coffee | | |
| 6 Amount (\$) 17.59 Officeholder Funds for Officeholder Expenditures | 7 Payee address; 200 Crescent Court Suite 40 Dallas, TX 75201 | City; | State; Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Beverage expense | Coffee Meeting | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 09/26/2022 | Glorias Restaurant | | |
| Amount (\$) 37.31 Campaign Funds for | Payee address; 600 N Bishop Avenue Dallas, TX 75208 | City; | State; Zip Code |
| Campaign Expenditures | | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Donor | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 09/26/2022 | Mailchimp | | |
| Amount (\$) 104.46 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 675 Ponce De Leon Ave Atlanta, GA 30308 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Advertising Expense | Electronic Mail subsc | ription |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | DED |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to e | complete this form. | Other (enter a category not listed above) |
|--|--|---------------------|---|
| 1 Total pages Schedule F1: 39 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 09/27/2022 | Benny Guzman | | |
| 6 Amount (\$) 40.00 | 7 Payee address; 306 South Montreal Aventhedlas, TX 75208 | City; | State; Zip Code |
| Officeholder Funds for Officeholder Expenditures | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE | Donation | Adamson HS Donation | on |
| OF EXPENDITURE | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 09/27/2022 | Chad West | | |
| Amount (\$) 50.74 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 810 North Bishop AvenuĐallas, TX 75208 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Food expense | Meal Reimbursement | t |
| EXI ENDITORE | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 10/03/2022 | Dallas Youth Sports | | |
| Amount (\$) 1000.00 | Payee address; | City; | State; Zip Code |
| Officeholder Funds for Officeholder Expenditures | 2524 West Ledbetter Dri⊅allas, TX 75233 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Donation | Donation | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austii | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|---|--|---------------------|--------------------------------------|----|
| 1 Total pages Schedule F1: 40 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers | ;) |
| 4 Date | 5 Payee name | | | |
| 10/03/2022 | Shutterfly | | | |
| 6 Amount (\$) 11.13 Officeholder Funds for Officeholder Expenditures | 7 Payee address; 2800 Bridge Parkway Redwood City, CA 94065 | City; | State; Zip Code | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Gift | Photos for gift | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held | |
| Date | Payee name | | | |
| 10/03/2022 | Glorias Restaurant | | | |
| Amount (\$) 65.13 | Payee address; 600 N Bishop Avenue Dallas, TX 75208 | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | | T = | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Donor | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held | |
| Date | Payee name | | | |
| | | | | |
| 10/03/2022 | Cadence Bank | | | |
| Amount (\$) 36.00 | Payee address; | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | 305 E Colorado Blvd Dallas, TX 75203 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Fees | Stop item | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense | |
| Complete ONLY if direct | Candidate / Officeholder name | Office sought | Office held | |
| expenditure to benefit C/OF | | CSS SSUGIN | | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|--|--|-------------------------------|----------------------------|--------------------|
| 1 Total pages Schedule F1: 41 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 10/04/2022 | Oddfellows | | | |
| 6 Amount (\$) 7.82 Officeholder Funds for Officeholder Expenditures | 7 Payee address; 316 W 7th Street Dallas, TX 75208 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Beverage expense | Coffee Meeting | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 10/04/2022 | Village Burger | | | |
| Amount (\$) 26.14 Officeholder Funds for | Payee address; 3699 McKinney Avenue Dallas, TX 75210 | City; | State; | Zip Code |
| Officeholder Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Lunch meeting with city staff | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 10/05/2022 | Cannons Irish Pub | | | |
| Amount (\$) 11.41 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 1314 W Davis Street Dallas, TX 75208 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Beverage expense | Meeting with neighbor | orhood leadership | |
| | Check if travel outside of Texas. Complete Schedule T. | Chack if Austin | n, TX, officeholder living | eynense |
| Complete ONLY if dire-4 | Candidate / Officeholder name | Office sought | , 17, omeendider living | Office held |
| Complete ONLY if direct expenditure to benefit C/OF | | Onice sought | | Omice field |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | DED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|---|--|----------------------|----------------------------|--------------------|
| 1 Total pages Schedule F1: 42 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | 1 | | |
| 10/05/2022 | Wholefoods | | | |
| 6 Amount (\$) 28.65 Officeholder Funds for Officeholder Expenditures | 7 Payee address; 4100 Lomo Alto Drive Dallas, TX 75205 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Gift | Flowers | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 10/05/2022 | Oddfellows | | | |
| Amount (\$) 29.90 | Payee address; 316 W 7th Street Dallas, TX 75208 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting with BADM | Ā | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| | | | | |
| 10/05/2022 | Xaman Café | | | |
| Amount (\$) 59.64 | Payee address; 334 Jefferson Blvd Dallas, TX 75208 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | 334 Jefferson Blvd Dallas, TX 75208 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE | Food expense | Meeting with Resider | nts | |
| OF EXPENDITURE | | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | DED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to o | complete this form. | | , |
|--|--|---------------------------------|----------------------------|----------------------|
| 1 Total pages Schedule F1: 43 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethic | s Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 10/05/2022 | Tjs Fish Market | | | |
| 6 Amount (\$) 67.34 Campaign Funds for Campaign Expenditures | 7 Payee address; 4212 Oak Lawn Avenue Dallas, TX 75219 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Donor | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder livin | g expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 10/05/2022 | Delphinium | | | |
| Amount (\$) 135.26 Officeholder Funds for | Payee address; 5806 W Lovers Lane Dallas, TX 75205 | City; | State; | Zip Code |
| Officeholder Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Gift | Floral Arrangement and Delivery | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder livin | g expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 10/05/2022 | Chad West | | | |
| Amount (\$) 1276.02 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 810 North Bishop AvenuĐallas, TX 75208 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Contract Labor | Reimbursement for c | ontract labor | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | g expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | Other (enter a category not listed above) |
|--|---|---------------------|---|
| 1 Total pages Schedule F1: 44 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 10/06/2022 | PayPal | | |
| 6 Amount (\$) 300.00 Campaign Funds for | 7 Payee address; 2211 N First Street San Jose, CA 95131 | City; | State; Zip Code |
| Campaign Expenditures | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE | Office Overhead | Web hosting | |
| OF EXPENDITURE | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 10/07/2022 | DFW Airport Park DFW | | |
| Amount (\$) 54.00 | Payee address; | City; | State; Zip Code |
| Officeholder Funds for Officeholder Expenditures | 2400 Aviation Drive DFW Airport, TX 75261 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Travel Out of District | Parking | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 10/07/2022 | The Kessler School | | |
| Amount (\$) 2000.00 | Payee address; | City; | State; Zip Code |
| Officeholder Funds for Officeholder Expenditures | 1215 Turner Avenue Dallas, TX 75208 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE | Donation | Donation | |
| OF EXPENDITURE | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | S SCHEDULE AS NEE | EDED |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | , , | |
|--|--|----------------------|----------------------------|----------------------|
| 1 Total pages Schedule F1: 45 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | s Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 10/11/2022 | Dallas LGBTQ Bar | | | |
| 6 Amount (\$) 50.00 Officeholder Funds for Officeholder Expenditures | 7 Payee address; 2100 Ross Avenue Dallas, TX 75201 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Fees | Membership Dues | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | ı expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 10/11/2022 | Walgreens | | | |
| Amount (\$) 56.56 Officeholder Funds for | Payee address; 1306 N Beckley Ave Dallas, TX 75203 | City; | State; | Zip Code |
| Officeholder Expenditures | | 1 | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Gift | Cards and Gift Cards | i | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 10/11/2022 | Mariott | | | |
| Amount (\$) 58.88 | Payee address; 889 E Market Street San Antonio, TX 78205 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | 3aii Ainoino, 17 70203 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Meal expense | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to o | complete this form. | cale. (cind. a category not act above) |
|--|--|-----------------------|--|
| 1 Total pages Schedule F1: 46 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 10/11/2022 | Fair Park | | |
| 6 Amount (\$) 75.00 Officeholder Funds for | 7 Payee address; 1462 First Ave Dallas, TX 75210 | City; | State; Zip Code |
| Officeholder Expenditures | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF | Donation | Donation | |
| EXPENDITURE | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 10/11/2022 | ActBlue Rochell Garza | | |
| Amount (\$) 100.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | P.O. Box 5683 Brownsville, TX 78523 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Contribution | Donation | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| | - | | |
| 10/11/2022 | Nuvo | | |
| Amount (\$) 416.75 | Payee address; | City; | State; Zip Code |
| Officeholder Funds for Officeholder Expenditures | 3311 Oak Lawn Avenue Dallas, TX 75219 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Gifts | Gifts for Retiring Co | mmissioners |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|---|--|---------------------|----------------------------|--------------------|
| 1 Total pages Schedule F1: 47 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 10/12/2022 | Oddfellows | | | |
| 6 Amount (\$) 15.30 Officeholder Funds for Officeholder Expenditures | 7 Payee address; 316 W 7th Street Dallas, TX 75208 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Beverage expense | Coffee Meeting | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 10/12/2022 | Stevens Park Golf Course | | | |
| Amount (\$) 16.18 Officeholder Funds for | Payee address; 1005 N Montclair Dallas, TX 75208 | City; | State; | Zip Code |
| Officeholder Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Beverage expense | Meeting with NOCG | S | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 10/12/2022 | Taco y Vino | | | |
| Amount (\$) 38.56 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 213 W 8th Street Dallas, TX 75208 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Donor | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austii | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | DED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| oreal card ayment | The Instruction Guide explains how to | complete this form. | |
|--|--|------------------------------|---------------------------------------|
| 1 Total pages Schedule F1: 48 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 10/13/2022 | Stevens Park Golf Course | | |
| 6 Amount (\$) 9.95 | 7 Payee address; 1005 N Montclair Dallas, TX 75208 | City; | State; Zip Code |
| Officeholder Funds for Officeholder Expenditures | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Beverage expense | Meeting with NOCG | SS |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 10/13/2022 | Tjs Fish Market | | |
| Amount (\$) 50.65 | Payee address; 4212 Oak Lawn Avenue Dallas, TX 75219 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Potential Donor | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 10/13/2022 | GoDaddy | | |
| Amount (\$) 136.94 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 14455 N Hayden Road Suite 100 Scottsdale, AZ 85260 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Office Overhead | Web hosting | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEI | EDED |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | |
|--|--|------------------------------|---------------------------------------|
| 1 Total pages Schedule F1: 49 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 10/13/2022 | At&t Mobility | | |
| 6 Amount (\$) 49.52 Campaign Funds for Campaign Expenditures | 7 Payee address; P.O. Box 6463 Carol Stream, IL 60197 | City; | State; Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Office Overhead | Communication Pho | ne |
| | (C) Check if travel outside of Texas. Complete Schedule T. | Check if Aust | in, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OI | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 10/14/2022 | Chad West | | |
| Amount (\$) 150.00 | Payee address; 810 North Bishop AvenuÐallas, TX 75208 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | | T 5 | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Contract Labor | Campaign Labor Reimbursement | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| | | | |
| 10/14/2022 | Tyler Arts District Investments, LLC | | |
| Amount (\$) 255.00 | Payee address; 3606 South Tyler Street Dallas, TX 75224 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 5000 Bount Tyler Bureet Buntas, 111 /5221 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Office Overhead | Office Rent | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NE | EDED |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to o | complete this form. | outer (enter a sutege | ., |
|--|--|----------------------|----------------------------|--------------------|
| 1 Total pages Schedule F1: 50 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 10/14/2022 | Rosemont Dads | | | |
| 6 Amount (\$) 1500.00 | 7 Payee address; 719 N Montclair Ave Dallas, TX 75208 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | 715 Wiontelan 7We Banas, 177 75200 | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE | Donation | Donation | | |
| OF EXPENDITURE | | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 10/17/2022 | Sketches of Spain | | | |
| Amount (\$) 22.32 | Payee address; | City; | State; | Zip Code |
| | 321 N Zang Blvd Dallas, TX 75208 | | | |
| Officeholder Funds for Officeholder Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF | Beverage expense | Coffee Meeting | | |
| EXPENDITURE | | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| | | | | |
| 10/17/2022 | Glorias Restaurant | | | |
| Amount (\$) 40.65 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for | 600 N Bishop Avenue Dallas, TX 75208 | | | |
| Campaign Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE | Fundraising Solicitation | Meeting with Endorse | er | |
| OF EXPENDITURE | | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living | expense |
| Complete ONLY if direct | Candidate / Officeholder name | Office sought | | Office held |
| expenditure to benefit C/OF | 1 | | | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | DED | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | Other (enter a category not listed above) |
|--|--|---------------------|---|
| 1 Total pages Schedule F1: 51 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 10/18/2022 | Village Burger | | |
| 6 Amount (\$) 11.83 | 7 Payee address; 3699 McKinney Avenue Dallas, TX 75210 | City; | State; Zip Code |
| Officeholder Funds for Officeholder Expenditures | | _ | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF | Beverage expense | Coffee Meeting | |
| EXPENDITURE | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 10/18/2022 | Kids Who Care | | |
| Amount (\$) | Payee address; | City; | State; Zip Code |
| | 1300 Gendy Street Fort Worth, TX 76107 | | |
| Officeholder Funds for Officeholder Expenditures | | _ | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF | Donation | Donation | |
| EXPENDITURE | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| | | | |
| 10/18/2022 | Tyrone Marshall | | |
| Amount (\$) 120.00 | Payee address; 3606 S Tyler Street Dallas, TX 75224 | City; | State; Zip Code |
| Campaign Funds for | Jours Tyler Succei Dallas, 1A /3224 | | |
| Campaign Expenditures | | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF | Contract Labor | Office Maintenance | |
| EXPENDITURE | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living expense |
| Complete ONLY if direct | Candidate / Officeholder name | Office sought | Office held |
| expenditure to benefit C/OH | l | | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | :DED |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | Other (enter a category not listed above) |
|--|--|---------------------|---|
| 1 Total pages Schedule F1: 52 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | l | |
| 10/19/2022 | Dash for the Beads | | |
| 6 Amount (\$) 2505.41 | 7 Payee address; 3606 S Tyler Street Dallas, TX 75224 | City; | State; Zip Code |
| Officeholder Funds for Officeholder Expenditures | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE | Donation | Donation | |
| OF EXPENDITURE | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 10/19/2022 | At&t Services | | |
| Amount (\$) 49.52 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 3606 S Tyler Street Dallas, TX 75224 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF | Office Overhead | Internet | |
| EXPENDITURE | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 10/24/2022 | Chad West | | |
| Amount (\$) 711.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for | 810 North Bishop AvenuDallas, TX 75208 | | |
| Campaign Expenditures | | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF | Contract Labor | Reimbursement | |
| EXPENDITURE | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| | ATTAON ADDITIONAL CODING CO | | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | :DED |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to complete this form. | | | |
|---|--|---|----------------------------|-------------|
| 1 Total pages Schedule F1: 53 of 70 | 2 FILER NAME Chad A West | 3 Filer ID (Ethics Commission Filers) | | |
| 4 Date | 5 Payee name | | | |
| 10/25/2022 | Mailchimp | | | |
| 6 Amount (\$) 104.46 Campaign Funds for Campaign Expenditures | 7 Payee address; 675 Ponce De Leon Ave Atlanta, GA 30308 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Advertising Expense | Email Marketing and Campaign Communications | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 10/27/2022 | La Calle Doce | | | |
| Amount (\$) 49.23 | Payee address; 415 W 12th Street Dallas, TX 75208 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting with Hispani | ic Biz Owners | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 10/28/2022 | Tjs Fish Market | | | |
| Amount (\$) 35.06 | Payee address; | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | 4212 Oak Lawn Avenue Dallas, TX 75219 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Lunch with Commiss | ioner | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austir | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | DED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|---|--|---------------------|-----------------------------|--------------------|
| 1 Total pages Schedule F1: 54 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | 1 | |
| 10/31/2022 | Viasat In-Flight | | | |
| 6 Amount (\$) 19.00 Officeholder Funds for Officeholder Expenditures | 7 Payee address; 3606 S Tyler Street Dallas, TX 75224 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Travel Out of District | Internet | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 10/31/2022 | Viasat In-Flight | | | |
| Amount (\$) 19.00 | Payee address; 3606 S Tyler Street Dallas, TX 75224 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | Janas, 1X /3224 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Travel Out of District | Internet | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 10/31/2022 | EcoLatino | | | |
| Amount (\$) 900.00 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 3606 South Tyler Street Dallas, TX 75224 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF | Advertising Expense | Advertising | | |
| EXPENDITURE | | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | Other (enter a category not listed above) |
|--|--|---------------------|---|
| 1 Total pages Schedule F1: 55 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 11/01/2022 | Tjs Fish Market | | |
| 6 Amount (\$) 118.22 | 7 Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 4212 Oak Lawn Avenue Dallas, TX 75219 | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE | Fundraising Solicitation | Fundraising dinner | |
| OF EXPENDITURE | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 11/02/2022 | Taco y Vino | | |
| Amount (\$) 69.49 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 213 W 8th Street Dallas, TX 75208 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Jimmy | С |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| | - | | |
| 11/02/2022 | Blue Guardian Foundation Donation | | |
| Amount (\$) 250.00 | Payee address; | City; | State; Zip Code |
| Officeholder Funds for | 3606 S Tyler Street Dallas, TX 75224 | | |
| Officeholder Expenditures | | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF | Donation | Donation | |
| EXPENDITURE | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| Complete ONLY if direct | Candidate / Officeholder name | Office sought | Office held |
| expenditure to benefit C/OF | 1 | | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|---|--|---------------------|-----------------------------|--------------------|
| 1 Total pages Schedule F1: 56 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | 1 | |
| 11/03/2022 | Berkleys MKT | | | |
| 6 Amount (\$) 22.47 Officeholder Funds for Officeholder Expenditures | 7 Payee address; 634 W Davis Street Dallas, TX 75208 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Cookies for commun | ity meeting | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 11/03/2022 | Benny Guzman | | | |
| Amount (\$) 200.00 | Payee address; 306 Sourth Montreal Avenue | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | Dallas, TX 75208 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Contract Labor | Campaign Labor | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 11/03/2022 | Katy Seitzler | | | |
| Amount (\$) 70.00 | Payee address; 217 Sycamore Creek Roalllen, TX 75002 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 217 Sycamore Creek Rolation, 174 73002 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Contract Labor | Email Marketing and | l Campaign Commu | nications |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to e | complete this form. | Other (enter a categor | y not listed above) |
|--|--|---------------------|-----------------------------|---------------------|
| 1 Total pages Schedule F1: 57 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | <u>I</u> | |
| 11/03/2022 | Qualigraphics | | | |
| 6 Amount (\$) 90.55 | 7 Payee address; 934 Stevens Woods CourDallas, TX 75208 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Advertising Expense | Campaign Banner | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | (| Office held |
| Date | Payee name | | | |
| 11/03/2022 | Qualigraphics | | | |
| Amount (\$) 300.87 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 934 Stevens Woods CourDallas, TX 75208 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Advertising Expense | Wrapped Flavor Burs | st Candies | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | (| Office held |
| Date | Payee name | | | |
| 11/07/2022 | Tom Thumb | | | |
| Amount (\$) | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 315 S Hampton Road Dallas, TX 75211 | | , | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Food for volunteers | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to o | complete this form. | Garer (errier a satege | ., |
|---|--|----------------------|----------------------------|--------------------|
| 1 Total pages Schedule F1: 58 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 11/09/2022 | Qualigraphics | | | |
| 6 Amount (\$) 3474.07 | 7 Payee address; 934 Stevens Woods CourDallas, TX 75208 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF | Advertising Expense | Framework for Tent | | |
| EXPENDITURE | | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 11/09/2022 | Qualigraphics | | | |
| Amount (\$) 2958.18 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 934 Stevens Woods CourDallas, TX 75208 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Advertising Expense | Campaign tent, table | cover and yard sign | s |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 11/00/2022 | Panny Cygnan | | | |
| 11/09/2022 | Benny Guzman | 0" | O | 7' 0 1 |
| Amount (\$) 80.00 | Payee address; 306 Sourth Montreal Avenue | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | Dallas, TX 75208 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE | Contract Labor | Campaign Labor | | |
| OF EXPENDITURE | | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| | 1 | | | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Other (enter a category not listed above)

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|--|--|---------------------|----------------------------|----------------------|
| 1 Total pages Schedule F1: 59 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | s Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 11/14/2022 | Oddfellows | | | |
| $\begin{array}{c} \textbf{6} \ \text{Amount (\$)} \\ 14.40 \\ \\ \text{Officeholder Funds for} \\ \\ \text{Officeholder Expenditures} \end{array}$ | 7 Payee address; 316 W 7th Street Dallas, TX 75208 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Beverage expense | Coffee Meeting | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 11/15/2022 | Qualigraphics | | | |
| Amount (\$) 1352.48 | Payee address; 934 Stevens Woods CounDallas, TX 75208 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Advertising Expense | Vinyl Slap Bracelet | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| | | | | |
| 11/15/2022 | Tyrone Marshall | | | |
| Amount (\$) 120.00 | Payee address; 3606 S Tyler Street Dallas, TX 75224 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | Januas, 17. 73224 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF | Contract Labor | Office Maintenance | | |
| EXPENDITURE | | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | DED | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to o | complete this form. | Other (enter a category | not listed above) |
|--|--|---------------------|-------------------------------|--------------------|
| 1 Total pages Schedule F1: 60 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics 0 | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 11/16/2022 | Stevens Park Golf Course | | | |
| 6 Amount (\$) 16.88 | 7 Payee address; 1005 N Montclair Dallas, TX 75208 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Beverage expense | Community Meeting | | |
| | (C) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living e. | xpense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | O | ffice held |
| Date | Payee name | | | |
| 11/18/2022 | Viasat In-Flight | | | |
| Amount (\$) 19.00 | Payee address; | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | 3606 S Tyler Street Dallas, TX 75224 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Travel Out of District | Internet | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living ex | kpense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | 0 | ffice held |
| Date | Payee name | | | |
| 11/21/2022 | Chad West PLLC | | | |
| Amount (\$) 74.69 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 3606 South Tyler Street Dallas, TX 75224 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Advertising Expense | Stamps and Cards Re | eimbursement | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living ex | pense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | C | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to e | complete this form. | Other (enter a category not) | sted above) |
|---|--|---------------------|------------------------------------|-----------------|
| 1 Total pages Schedule F1: 61 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Comm | mission Filers) |
| 4 Date | 5 Payee name | | | |
| 11/21/2022 | Chad West PLLC | | | |
| 6 Amount (\$) 144.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 3606 South Tyler Street Dallas, TX 75224 | City; | State; Zi _l | o Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE | Advertising Expense | Stamps Reimburseme | ent | |
| OF EXPENDITURE | The terminal Emperior | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expens | se |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office | e held |
| Date | Payee name | | | |
| 11/21/2022 | Victoria Perez | | | |
| Amount (\$) | Payee address; | City; | State; Zi _l | Code |
| 28.12 Campaign Funds for Campaign Expenditures | 808 Rutherford Road Waxahachie, TX 75165 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Advertising Expense | Mailing Labels Reim | bursement | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expens | se |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office | held |
| Date | Payee name | | | |
| 11/25/2022 | Mailabina | | | |
| 11/25/2022 | Mailchimp Rayee address: | City | State: 7ii | Codo |
| Amount (\$) 104.46 | Payee address; 675 Ponce De Leon Ave Atlanta, GA 30308 | City; | State; Zi _l | o Code |
| Campaign Funds for Campaign Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Advertising Expense | Email Marketing and | l Campaign Communicati | ons |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expens | e |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Offic | e held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|---|--|---------------------|----------------------------|----------------------|
| 1 Total pages Schedule F1: 62 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | s Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 11/29/2022 | The Dallas Assembly | | | |
| 6 Amount (\$) 50.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 12900 Preston Road Suite 1210 Dallas, TX 75230 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Fees | Fee | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 11/29/2022 | Maria Salazar | | | |
| Amount (\$) 400.00 | Payee address; 2605 East Ledbetter DrivDallas, TX 75216 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Contract Labor | Office Cleaning | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| | • | | | |
| 11/29/2022 | Taco y Vino | | | |
| Amount (\$) 121.45 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 213 W 8th Street Dallas, TX 75208 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE | Fundraising Solicitation | Meeting with Donor | | |
| OF EXPENDITURE | | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | DED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| oreal card ayment | The Instruction Guide explains how to | complete this form. | | |
|---|---|----------------------|------------------------------------|-------------|
| 1 Total pages Schedule F1: 63 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission | Filers) |
| 4 Date | 5 Payee name | | | |
| 11/30/2022 | Veracruz | | | |
| 6 Amount (\$) 39.53 Officeholder Funds for Officeholder Expenditures | 7 Payee address; 408 N Bishop Avenue Suite 107 Dallas, TX 75208 | City; | State; Zip Code |) |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Meeting with City St | aff | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held | |
| Date | Payee name | | | |
| 11/30/2022 | McShan Florist | | | |
| Amount (\$) 251.49 | Payee address; 10311 Garland Road Dalals, TX 75117 | City; | State; Zip Code | > |
| Officeholder Funds for Officeholder Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Gift | Flowers for funeral | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held | |
| Date | Payee name | | | |
| 12/01/2022 | Stonewall Democrats of Dallas | | | |
| Amount (\$) 250.00 | Payee address; | City; | State; Zip Code | |
| Officeholder Funds for Officeholder Expenditures | P.O. Box 192305 Dallas, TX 75219 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Donation | Sponsorship | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | Other (enter a category) | lot listed above) |
|--|--|----------------------|--------------------------------|-------------------|
| 1 Total pages Schedule F1: 64 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics C | ommission Filers) |
| 4 Date | 5 Payee name | | <u> </u> | |
| 12/01/2022 | Tjs Fish Market | | | |
| 6 Amount (\$) 44.90 | 7 Payee address; 4212 Oak Lawn Avenue Dallas, TX 75219 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE | Food expense | Lunch meeting with J | policy advisor | |
| OF EXPENDITURE | | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living ex | pense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Of | fice held |
| Date | Payee name | | | |
| 12/02/2022 | Walgreens | | | |
| Amount (\$) 27.84 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 1306 N Beckley Ave Dallas, TX 75203 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Office Overhead | Greeting Cards | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living ex | pense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Of | fice held |
| Date | Payee name | | | |
| 12/02/2022 | Encina | | | |
| Amount (\$) 75.08 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 614 W Davis Street Dallas, TX 75208 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Fundraising Solicitation | Meeting with Organia | zer | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living ex | pense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | O | ffice held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to o | complete this form. | Garer (errier a satisge | ., |
|---|---|------------------------------------|-----------------------------|--------------------|
| 1 Total pages Schedule F1: 65 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date 12/02/2022 | 5 Payee name 1010 Partnership LLC | | l | |
| 6 Amount (\$) 120.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 3606 South Tyler Street Dallas, TX 75224 | City; | State; | Zip Code |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead | (b) Description Stamps Reimburseme | ent | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living | expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 12/05/2022 | Enos Pizza | O:4 ·· | Ct-t-: | 7:- 0-1- |
| Amount (\$) 71.33 Campaign Funds for Campaign Expenditures | Payee address; 407 N Bishop Avenue Dallas, TX 75208 | City; | State; | Zip Code |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food expense | Description Meeting with Volunte | eers | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 12/05/2022 | Smugmug.com | | | |
| Amount (\$) 75.78 Campaign Funds for Campaign Expenditures | Payee address; 3606 S Tyler Street Dallas, TX 75224 | City; | State; | Zip Code |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Gift | Gift | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | expense |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| | | | | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | , |
|---|--|---------------------|----------------------------|----------------------|
| 1 Total pages Schedule F1: 66 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethic | s Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 12/05/2022 | Eggsellent Café | | | |
| 6 Amount (\$) 111.79 Campaign Funds for Campaign Expenditures | 7 Payee address; 4218 Lemmon Avenue Dallas, TX 75219 | City; | State; | Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Food expense | Volunteer Breakfast | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | g expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 12/05/2022 | Oak Cliff Chamber of Commerce | | | |
| Amount (\$) 350.00 | Payee address; 3606 S Tyler Street Dallas, TX 75224 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Fees | Membership Dues | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | g expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| Date | Payee name | | | |
| 12/06/2022 | Cibo Divino | | | |
| Amount (\$) 516.96 | Payee address; 1868 Sylvan Ave Dallas, TX 75208 | City; | State; | Zip Code |
| Officeholder Funds for Officeholder Expenditures | Touo Sylvan Ave Danas, 1X 73206 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF | Food expense | Board & Commission | n Party | |
| EXPENDITURE | | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living | g expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to e | complete this form. | Other (enter a category not listed above) | |
|---|--|---------------------|---|-----|
| 1 Total pages Schedule F1: 67 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filer | rs) |
| 4 Date | 5 Payee name | | | |
| 12/06/2022 | Chad West PLLC | | | |
| 6 Amount (\$) 120.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 3606 South Tyler Street Dallas, TX 75224 | City; | State; Zip Code | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE | Office Overhead | Stamps Reimburseme | ent | |
| OF EXPENDITURE | Office Overficad | Stamps Remourseme | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held | |
| Date | Payee name | | | |
| 12/06/2022 | Methodist Hospitals of Dallas Guild | | | |
| Amount (\$) | Payee address; | City; | State; Zip Code | |
| Officeholder Funds for Officeholder Expenditures | 4008 Stanford Avenue Dallas, TX 75225 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Donation | Donation | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held | |
| Date | Payee name | | | |
| | | | | |
| 12/07/2022 | Katy Seitzler | | | |
| Amount (\$) 87.50 | Payee address; 217 Sycamore Creek Roa⁄dllen, TX 75002 | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | 217 Sycamore Creek Roddien, 174 73002 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Advertising Expense | Email Marketing and | Campaign Communications | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin | n, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | |
|---|--|---------------------|---------------------------------------|
| 1 Total pages Schedule F1: 68 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 12/12/2022 | Dallas Youth Sports | | |
| $ \begin{array}{c} \textbf{6} \ \text{Amount (\$)} \\ 2500.00 \\ \\ \text{Officeholder Funds for} \\ \\ \text{Officeholder Expenditures} \\ \end{array} $ | 7 Payee address; 2524 West Ledbetter Dri Dallas, TX 75233 | City; | State; Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Donation | Christmas Sponsor | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| 12/13/2022 | Chad West PLLC | | |
| Amount (\$) 91.76 | Payee address; 3606 South Tyler Street Dallas, TX 75224 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 0-1 | December | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Office Overhead | Stamps Reimburseme | ent |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| Date | Payee name | | |
| | | | |
| 12/14/2022 | Casa Guanajuato | | |
| Amount (\$) 250.00 | Payee address; 1002 West Brooklyn AvdnaHas, TX 75208 | City; | State; Zip Code |
| Officeholder Funds for Officeholder Expenditures | 1002 West Blooklyll Avdualias, 1A 73206 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Donation | Donation | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEE | EDED |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | | |
|--|---|---------------------|--------------------------------------|-----|
| 1 Total pages Schedule F1: 69 of 70 | 2 FILER NAME Chad A West | | 3 Filer ID (Ethics Commission Filer | rs) |
| 4 Date | 5 Payee name | | | |
| 12/15/2022 | Color Me Empowered | | | |
| $ \begin{array}{c} \textbf{6} \ \text{Amount (\$)} \\ 200.00 \\ \\ \text{Officeholder Funds for} \\ \\ \text{Officeholder Expenditures} \\ \end{array} $ | 7 Payee address; 2101 West Clarendon Dr Dæ llas, TX 75208 | City; | State; Zip Code | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE OF EXPENDITURE | Gift | Donation in Memory | y of Anna Casey | |
| | (C) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | tin, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OI | Candidate / Officeholder name | Office sought | Office held | |
| Date | Payee name | | | |
| 12/15/2022 | Young Latino Democrats | | | |
| Amount (\$) 150.00 | Payee address; 3606 S Tyler Street Dallas, TX 75224 | City; | State; Zip Code | |
| Officeholder Funds for Officeholder Expenditures | | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Donation | Holiday fundraiser | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held | |
| Date | Payee name | | | |
| | | | | |
| 12/16/2022 | Cielo Tinto, LLC | | | |
| Amount (\$) 100.00 | Payee address; 1817 South Vernon Aver®allas, TX 75224 | City; | State; Zip Code | |
| Officeholder Funds for Officeholder Expenditures | 1017 South Vernon Avenuenas, 1A 73224 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Donation | Christmas Sponsor | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name | Office sought | Office held | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NE | EDED | |

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | |
|---|--|--|---|
| 1 Total pages Schedule F1: 70 of 70 | 2 FILER NAME Chad A West | 3 Filer ID (Ethics Commission Filers |) |
| 4 Date | 5 Payee name | 1 | |
| 12/19/2022 | Oak Cliff Lions Club | | |
| 6 Amount (\$) 150.00 Campaign Funds for Campaign Expenditures | 7 Payee address; P.O. Box 4445 Dallas, TX 75208 | City; State; Zip Code | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Fees | Membership Dues | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austin, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name H | Office sought Office held | |
| Date | Payee name | | |
| Amount (\$) | Payee address; | City; State; Zip Code | |
| PURPOSE OF | Category (See Categories listed at the top of this schedule) | Description | |
| EXPENDITURE | | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name H | Office sought Office held | |
| Date | Payee name | | |
| Amount (\$) | Payee address; | City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/Oh | Candidate / Officeholder name H | Office sought Office held | |
| | ATTACH ADDITIONAL COPIES OF THIS | S SCHEDULE AS NEEDED | |