CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages file	ed:
3 CANDIDATE/ OFFICEHOLDER NAME	MS / MRS / MR FIRST Tennell NICKNAME LAST Atkins	MISUFFIX	OFFICE	USE ONLY
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE/		Dallas TX 75237 EXTENSION		
OFFICEHOLDER PHONE 6 CAMPAIGN TREASURER NAME	(469) 417 8939 MS / MRS / MR FIRST Velma NICKNAME LAST Milliner	MI 	Date Hand-delivered Receipt # Date Processed Date Imaged	or Date Postmarked Amount \$
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SI 1407 Laura Lane	JITE #; CITY; STATE; Dallas TX 75241	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (214) 371 7482	EXTENSION		
9 REPORT TYPE	X January 15 30th day before e		15th day aftr treasurer ap (Officeholder Final Report	pointment
10 PERIOD COVERED	Month Day Year 07 / 01 / 2019	THROUGH 12 /	Day Year 2019)
11 ELECTION	ELECTION DATE Month Day Year Primary X General	ELECTION TYPE Runoff Other Description Special		
12 OFFICE	OFFICE HELD (if any) Council District 8	13 OFFICE SOUGHT (if known Council District 8)	
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME		15	Filer ID (Ethics Commission Filers)
Tennell Atkins			
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANE	OTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITU DIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITH INSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS URES.	OUT THE CANDIDATE'S OR OFFICEHOLDER'S
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		
	SPECIFIC	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 24785.00
EXPENDITURE TOTALS 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00	
	4. TOTAL	POLITICAL EXPENDITURES	\$ 36113.03
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST D ORTING PERIOD	\$ 2074.85
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH AY OF THE REPORTING PERIOD	\$ 15181.00
18 AFFIDAVIT		I swear, or affirm, under penalty of per true and correct and includes all informunder Title 15, Election Code.	
		ELECTRONICALLY CE	ERTIFIED
		Signature of Candi	date or Officeholder
AFFIX NOTARY STAM	P/SEALABOVE		
Sworn to and subsc	ribed before me, b	by the said Tennell Atkins	, this the15th
		to certify which, witness my hand and seal of office.	
Signature of officer a	administering oath	Printed name of officer administering oath	Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	19 FILER NAME Tennell Atkins 20 Filer ID (Ethics Con			mmission Filers)
21		JLE SUBTOTALS F SCHEDULE		SUBTOTAL AMOUNT
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 24,785.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00
4.	4. SCHEDULE E: LOANS			\$ 0.00
5.		SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$ 36,113.03
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			\$ 0.00
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			\$ 0.00
9.	9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			\$ 0.00
10.	O. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			\$ 0.00
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$ 0.00
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT RETURNED TO FILER	IONS	\$ 0.00

SCHEDULE A1

The	Instruction Guide explains how to complete this for	rm. 1	Total pages Schedule A1: 1 of 14
2 FILER NAME		3	Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor uut-of-state PAC (ID#	#:	Amount of contribution (\$)
07/02/2019	Rick Callahan		250.00
	6 Contributor address; City; State;	Zip Code	
	P.O. Box 271405 Dallas, TX	X 75227-9579	
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instruction	is)
Date	Full name of contributor	#:)	Amount of contribution (\$)
07/02/2019	Curtis Ransom		300.00
07/02/2019	Contributor address; City; State;		300.00
	2848 Woodside St Suite 301 Dallas, TX	X 75204-2587	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	s)
Date	Full name of contributor	#:)	Amount of contribution (\$)
07/02/2019	Charles Ku		210.00
	Contributor address; City; State;	Zip Code	
	148 Red Oak Lane Flower Mo	ound, TX 75028	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	s)
Date	Full name of contributor	# :)	Amount of contribution (\$)
07/02/2019	John A Gates		250.00
	Contributor address; City; State; 4914 Keyhole Lane Dallas, TX		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	is)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 2 of 14	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Tennell Atkins				
4 Date	5 Full name of contributor ☐ out-of-state PAC (I	(ID#:)	7 Amount of contribution (\$)	
07/02/2019	Glenn Offutt		250.00	
0,,, 02, 2019	6 Contributor address; City; State;	Zip Code	250.00	
	6038 Bryan Pkwy Dallas, T	ΓX 75206-8002		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
07/02/2019	Helene Y Lee		100.00	
07/02/2019	Contributor address; City; State;	Zip Code	100.00	
		son, TX 75080		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
07/02/2019 Lois H McShan 150.00			150.00	
	Contributor address; City; State;	Zip Code		
	7103 Woodland Terrace Dallas, T	ΓX 75232		
Principal occup	nation / Job title (See Instructions)	Employer (See Instruct	ions)	
Date	Full name of contributor	(ID#-	Amount of contribution (\$)	
07/02/2019	DELVA J KING)	150.00	
Contributor address; City; State; Zip Code 1243 W PLEASANT RUN RD DESOTO, TX 75115				
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	ions)	

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SCHEDULE A1

		1	
The	Instruction Guide explains how to complete this fo	orm.	Total pages Schedule A1: 3 of 14
2 FILER NAME		3	Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor ut-of-state PAC (II	D#:	Amount of contribution (\$)
07/02/2019	Rulan Hebeler		100.00
	6 Contributor address; City; State;		
	3600 Lexington Ave Dallas, T	X 75206	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	s)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
07/02/2019	Randall Bryant		200.00
	Contributor address; City; State;		
	P.O. Box 191803 Dallas, T	X 75219	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	s)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
07/02/2019	Diane Ragsdale		200.00
07, 02, 2019	Contributor address; City; State; 3611 Dunbar Dallas, T	Zip Code	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruction	s)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
07/02/2019	Lucy J Cain		100.00
	Contributor address; City; State; 4308 Spring Ave Dallas, T	Zip Code X 75210-1651	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruction	s)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 4 of 14
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 07/02/2019	Nancy B Shelton 6 Contributor address; City; State;	Zip Code TX 75205	7 Amount of contribution (\$) 100.00
8 Principal occi	upation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date 07/02/2019	Rod Givens Contributor address; City; State;	(ID#:) ; Zip Code te, TX 75150-6807	Amount of contribution (\$)
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 07/02/2019	A B Marshall Contributor address; City; State;	Zip Code TX 75241	Amount of contribution (\$) 25.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 07/02/2019	Harryegtte Ehrhardt Contributor address; City; State;		Amount of contribution (\$) 25.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 5 of 14
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 07/02/2019	Gloria Barnes 6 Contributor address; City; State;	; Zip Code TX 75241	7 Amount of contribution (\$) 75.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date 07/02/2019	Neal D Sleeper Contributor address; City; State;	; Zip Code TX 75204	Amount of contribution (\$) 250.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 07/02/2019	Jim S Lake Jr Contributor address; City; State;	; Zip Code TX 75208	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 07/02/2019	Joseph Kemp Contributor address; City; State;	; Zip Code nville, TX 75116	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 6 of 14
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor out-of-state PAC (II	D#:)	7 Amount of contribution (\$)
07/02/2019	Helen Giddings		500.00
07/02/2019	6 Contributor address; City; State;	Zip Code	300.00
	400 S Zang Blvd Suite 1018 Dallas, T.		
		1170200	
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
07/02/2019	Gilbert Aranza		1000.00
	Contributor address; City; State;	Zip Code	
	P.O. Box 601527 Dallas, T.	TX 75360-1527	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
07/02/2019	Elisa Aranza		1000.00
	Contributor address; City; State;	Zip Code	
		"X 75360-1527	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
07/22/2019	Mitchell McCrea		1000.00
	Contributor address; City; State; 5750 Swiss Ave Dallas, T.	Zip Code X 75214	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 7 of 14
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
07/02/2019	Kenneth Choe		1000.00
	6 Contributor address; City; State;	Zip Code	
	2017 Westridge Dr Plano, T	X 75075	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	lions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
07/02/2019	Chong A Kim		1000.00
0770272019	Contributor address; City; State;	Zip Code	1000.00
	2013 Cottonwood Valley Circ S Irving, T	TX 75038	
Principal occupation / Job title (See Instructions) Employer (See Instruc		Employer (See Instruct	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
07/02/2019	Jackie Bewley		1000.00
	Contributor address; City; State; 2200 S Riverside Drive Fort Wo	Zip Code orth, TX 75104	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
07/02/2019	Michael Rader		250.00
.,,,,,		Zip Code ille, TX 76034	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 8 of 14
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
07/02/2019	Ibrahim Haddad		250.00
	6 Contributor address; City; State;	; Zip Code	
	4712 Holly Tree Dallas,	TX 75287-7219	
0 Division			
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 (\$)
07/02/2010	Pete Schenkel		
07/02/2019	Contributor address; City; State;		300.00
		TX 75205	
	4231 Beiciane Ave Danas,	1A 73203	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	iions)
Date		(ID#:)	Amount of contribution (\$)
07/02/2019	Jon Napper		500.00
	Contributor address; City; State;	Zip Code	
	300 N Akard Dallas,	TX 75201	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	(10#.	Amount of contribution (\$)
	Willis Johnson	(ID#:)	Amount of contribution (\$)
07/02/2019			500.00
	Contributor address; City; State; 1001 Belleview Dallas,	; Zip Code TX 75215	
	Tool Belieview Dalias,	1X /3213	
Principal occur	eation / Job title (See Instructions)	Employer (See Instruct	tions)
. mopa ooap		p.o/o. (000odot	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 9 of 14
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor □ out-of-state PAC (ID#:) Arnold Gachman 6 Contributor address; City; State; Zip Code 1229 Shady Oaks Lane Fort Worth, TX 76107		7 Amount of contribution (\$) 200.00	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date 07/02/2019	R Gerald Turner Contributor address; City; State;		Amount of contribution (\$) 100.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 07/05/2019	Timothy Pannell Contributor address; City; State;	Zip Code ΓX 75227	Amount of contribution (\$) 500.00
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 07/09/2019	Mary Suhn Contributor address; City; State;	Zip Code ΓX 75226	Amount of contribution (\$) 100.00
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 10 of 14
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date		ID#:)	7 Amount of contribution (\$)
07/20/2019	Brian Schwartz		1000.00
	6 Contributor address; City; State;	Zip Code	
	6606 Briar Cove Dallas, T	TX 75240	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
08/02/2019	Royce West		500.00
	Contributor address; City; State;		
	1212 Regents Park Ct Desoto, 7	TX 75115	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
08/02/2019	John and Artura Taylor		500.00
	Contributor address; City; State; 3602 Chimney Rock Drive Carrollto	Zip Code on, TX 75007	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of contribution (\$)
08/08/2019	William C Keyes		500.00
	Contributor address; City; State; 4709 Forest Lane Dallas, T		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 11 of 14
2 FILER NAME		3	3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor out-of-state PAC (ID)#:) 7	7 Amount of contribution (\$)
09/11/2019	Rick Callahan		250.00
0)/11/2017	6 Contributor address; City; State;		230.00
	P.O. Box 271405 Dallas, T.	X 75227	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	
8 Ринсіраї осос	pation / Job title (See instructions)	Employer (See monucuor	15)
Date	Full name of contributor)#:)	Amount of contribution (\$)
11/08/2019	Gregory N Kilhoffer		500.00
	Contributor address; City; State;	Zip Code	
	1209 Urban Lofts Dr Dallas, T	X 75215	
Principal occur	pation / Job title (See Instructions)	Employer (See Instruction	
1 mospa. 3312,	autori / tota auto (osta manasas)	Employor (Coo monature)	
Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of contribution (\$)
12/04/2019	Shih Hsiu Chen		500.00
12/04/2017	Contributor address; City; State;	Zip Code	300.00
		n, TX 75010	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ns)
Date	Full name of contributor out-of-state PAC (ID)#·)	Amount of contribution (\$)
12/10/2019	William Ming Tzong Tsao	, ,	800.00
	Contributor address; City; State; 6922 Aspen Creek Lane Dallas, T	Zip Code	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ns)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 12 of 14
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)
12/10/2019	Terry Y Smith		200.00
	6 Contributor address; City; State;	Zip Code	
	1246 Essex Dr Desoto,	TX 75115	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
12/09/2019	Jinsop Park		1000.00
	Contributor address; City; State;	Zip Code	
	1708 Coyote Rdg Carrollto	on, TX 75010	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
12/10/2019	Dr Charles T Ku		250.00
	Contributor address; City; State;	Zip Code	
	148 Red Oak Lane Flower I	Mound, TX 75208	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
12/10/2019	Lourdes R Spinola		250.00
	· · · · · · · · · · · · · · · · · · ·	Zip Code ΓX 75038	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 13 of 14				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Tennell Atkins				
4 Date	5 Full name of contributor uut-of-state PAC ((ID#:)	7 Amount of contribution (\$)	
12/16/2019	Gerald Alley		1000.00	
	6 Contributor address; City; State;	Zip Code		
	606 Loch Chalet Ct Arlingto	on, TX 76012		
		,		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)	
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)	
12/09/2019	John Field Scovell		500.00	
12/07/2017	Contributor address; City; State;	Zip Code	300.00	
		ΓX 75225		
	6322 De Bouelle Bullus,	111 13223		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)	
11/26/2019	Randall G Goss		500.00	
11/20/2019			300.00	
	Contributor address; City; State;			
	8401 N Central Expwy Suite 1000 Dallas, 7	1X 13223		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
12/05/2019	Dalton L Lott		1000.00	
,,,	Contributor address:	Zin Codo		
		Zip Code FX 75376-5209		
	210.2017.0020	111 /00 / 0 020/		
Principal occur	pation / Job title (See Instructions)	Employer (See Instruct	ions)	
	,	p - , - (

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 14 of 14
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
12/05/2019	Alfred Herron		500.00
	6 Contributor address; City; State;	Zip Code	
	1221 Bar Harbor Dallas, T	TX 75232	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of contribution (\$)
07/02/2019	Wick Allison		1000.00
07/02/2019	Contributor address; City; State;		1000.00
		TX 75201	
	730 IVSt I dai Salto 2100 Bullas, I	75201	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
	Contributor address; City; State;	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state_PAC (i	ID#:)	Amount of contribution (\$)
	Contributor address; City; State;	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
		·	
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NE	:EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 1 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 07/01/2019	5 Payee name Shell	
6 Amount (\$) 15.35	7 Payee address; City; State; Zip Code 8207 S. Hampton Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 07/11/2019	Payee name Shell	
Amount (\$) 46.88	Payee address; City; State; Zip Code 8207 S. Hampton Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 07/11/2019	Payee name Shell	
Amount (\$) 55.85	Payee address; City; State; Zip Code 8207 S. Hampton Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 2 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 07/16/2019	5 Payee name Shell	
6 Amount (\$) 59.75	7 Payee address; City; State; Zip Code 8207 S Hampton Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 07/21/2019	Payee name Shell	
Amount (\$) 50.70	Payee address; City; State; Zip Code 8207 S Hampton Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 07/31/2019	Payee name Shell	
Amount (\$) 46.26	Payee address; City; State; Zip Code 8207 S Hampton Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 3 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 08/14/2019	5 Payee name Shell	
6 Amount (\$) 47.78	7 Payee address; City; State; Zip Code 8207 S Hampton Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 09/05/2019	Payee name Shell	
Amount (\$) 37.92	Payee address; City; State; Zip Code 8207 S Hampton Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 09/06/2019	Payee name Shell	
Amount (\$) 51.02	Payee address; City; State; Zip Code 8207 S Hampton Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 4 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 09/24/2019	5 Payee name Shell		
6 Amount (\$) 53.37	7 Payee address; City; State; Zip Code 8207 S Hampton Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Check if Austin,	side of Texas. Complete Schedule T. TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 11/10/2019	Payee name Shell		
Amount (\$) 30.06	Payee address; City; State; Zip Code 8207 S Hampton Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 12/12/2019	Payee name Shell		
Amount (\$) 52.39	Payee address; City; State; Zip Code 8207 S Hampton Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (office a dataget) not not de above)
1 Total pages Schedule F1: 5 of 68	<u> </u>		3 Filer ID (Ethics Commission Filers)
4 Date 08/24/2019	5 Payee name 7 Eleven		
6 Amount (\$) 36.51	7 Payee address; City; State; Zip Code 2935 Camp Wisdom Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 11/18/2019	Payee name 7 Eleven		
Amount (\$) 38.48	Payee address; City; State; Zip Code 1290 S Lamar Dallas, TX 75215		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 09/07/2019	Payee name Exxon		
Amount (\$) 25.06	Payee address; City; State; Zip Code 7100 S R L Thornton Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 6 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 12/20/2019	5 Payee name Exxon	
6 Amount (\$) 30.85	7 Payee address; City; State; Zip Code 7100 S R L Thornton Dallas, TX 75232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 12/21/2019	Payee name Exxon	
Amount (\$) 42.31	Payee address; City; State; Zip Code 7100 S R L Thornton Dallas, TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 11/30/2019	Payee name Murphy USA	
Amount (\$) 23.83	Payee address; City; State; Zip Code 3102 W Wheatland Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	care. (c. ter a category not noted above)
1 Total pages Schedule F1: 7 of 68	•		3 Filer ID (Ethics Commission Filers)
4 Date 12/23/2019	5 Payee name Murphy USA		
6 Amount (\$) 23.18	7 Payee address; City; State; Zip Code 3102 W Wheatland Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 08/05/2019	Payee name Dallas House of Flowers		
Amount (\$) 48.71	Payee address; City; State; Zip Code 2410 W Red Bird Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 11/19/2019	Payee name Family Dollar		
Amount (\$) 59.36	Payee address; City; State; Zip Code 200 E Camp Wisdom Dallas, TX 75241		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Gredit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 8 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/05/2019	5 Payee name HOME DEPOT		
6 Amount (\$) 45.32	7 Payee address; City; State; Zip Code 2901 W WHEATLAND Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 07/06/2019	Payee name HOME DEPOT		
Amount (\$) 91.03	Payee address; City; State; Zip Code 2901 W WHEATLAND Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 07/06/2019	Payee name HOME DEPOT		
Amount (\$) 74.49	Payee address; City; State; Zip Code 2901 W WHEATLAND Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 9 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/07/2019	5 Payee name HOME DEPOT		
6 Amount (\$) 8.63	7 Payee address; City; State; Zip Code 2901 W WHEATLAND Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 07/07/2019	Payee name HOME DEPOT		
Amount (\$) 19.08	Payee address; City; State; Zip Code 2901 W WHEATLAND Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 07/14/2019	Payee name HOME DEPOT		
Amount (\$) 17.79	Payee address; City; State; Zip Code 2901 W WHEATLAND Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Gredit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 10 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/20/2019	5 Payee name HOME DEPOT		
6 Amount (\$) 56.29	7 Payee address; City; State; Zip Code 2901 W WHEATLAND Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 08/01/2019	Payee name HOME DEPOT		
Amount (\$) 22.34	Payee address; City; State; Zip Code 2901 W WHEATLAND Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 08/01/2019	Payee name HOME DEPOT		
Amount (\$) 41.07	Payee address; City; State; Zip Code 2901 W WHEATLAND Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Orean Gara Fayment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 11 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 08/18/2019	5 Payee name HOME DEPOT		
6 Amount (\$) 4.74	7 Payee address; City; State; Zip Code 2901 W WHEATLAND Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 09/01/2019	Payee name HOME DEPOT		
Amount (\$) 43.21	Payee address; City; State; Zip Code 2901 W WHEATLAND Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 11/10/2019	Payee name HOME DEPOT		
Amount (\$) 24.24	Payee address; City; State; Zip Code 2901 W WHEATLAND Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 12 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 11/17/2019	5 Payee name HOME DEPOT		
6 Amount (\$) 215.43	7 Payee address; City; State; Zip Code 2901 W WHEATLAND Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 11/16/2019	Payee name HOME DEPOT		
Amount (\$) 198.90	Payee address; City; State; Zip Code 2901 W WHEATLAND Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		ntside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 12/01/2019	Payee name HOME DEPOT		
Amount (\$) 23.66	Payee address; City; State; Zip Code 2901 W WHEATLAND Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salari	es/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 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)	
4 Date 07/06/2019	5 Payee name Lowes	·	
6 Amount (\$) 129.96	7 Payee address; City; State; Zip Cod 8520 S Hampton Dallas, TX 75232	е	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 07/20/2019	Payee name Lowes		
Amount (\$) 97.38	Payee address; City; State; Zip Cod 8520 S Hampton Dallas, TX 75237	e	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 07/20/2019	Payee name Lowes		
Amount (\$) 99.28	Payee address; City; State; Zip Cod 8520 S Hampton Dallas, TX 75232	e	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 14 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)	
4 Date 07/20/2019	5 Payee name Lowes		
6 Amount (\$) 196.43	7 Payee address; City; State; Zip Code 8520 S Hampton Dallas, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 07/05/2019	Payee name Office Depot		
Amount (\$) 23.77	Payee address; City; State; Zip Code 39759 LBJ Freeway Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 07/07/2019	Payee name Office Depot		
Amount (\$) 16.23	Payee address; City; State; Zip Code 39759 LBJ Freeway Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	earer (errier a satisfier) ristricted above)
1 Total pages Schedule F1: 15 of 68	•		3 Filer ID (Ethics Commission Filers)
4 Date 07/12/2019	5 Payee name Office Depot		
6 Amount (\$) 73.85	7 Payee address; City; State; Zip Code 39759 LBJ Freeway Suit D400 s, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 07/17/2019	Payee name Office Depot		
Amount (\$) 35.71	Payee address; City; State; Zip Code 39759 LBJ Freeway Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 07/29/2019	Payee name Office Depot		
Amount (\$) 20.02	Payee address; City; State; Zip Code 39759 LBJ Freeway Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 16 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/29/2019	5 Payee name Office Depot		
6 Amount (\$) 2.99	7 Payee address; City; State; Zip Code 39759 LBJ Freeway Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 12/04/2019	Payee name Office Depot		
Amount (\$) 21.31	Payee address; City; State; Zip Code 39759 LBJ Freeway Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 07/05/2019	Payee name TARGET		
Amount (\$) 81.17	Payee address; City; State; Zip Code 39739 LBJ FREEWAY Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 17 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 07/10/2019	5 Payee name Target	·
6 Amount (\$) 14.15	7 Payee address; City; State; Zip Code 39759 LBJ Freeway Dallas, TX 75237	
PURPOSE OF EXPENDITURE 9 Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate / Officeholder name	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies Office sought Office held
expenditure to benefit C/OF	Tennell Atkins	Council District 8
Date 07/27/2019	Payee name Target	
Amount (\$) 22.71	Payee address; City; State; Zip Code 39759 LBJ Freeway Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 12/17/2019	Payee name TARGET	
Amount (\$) 24.24	Payee address; City; State; Zip Code 39739 LBJ FREEWAY Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 18 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/02/2019	5 Payee name Eddie Dean and Company		
6 Amount (\$) 4112.96	7 Payee address; City; State; Zip Code P.O. Box 1022 Terrell, TX 75160		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Check if Austin,	side of Texas. Complete Schedule T. TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 12/20/2019	Payee name TARGET		
Amount (\$) 56.91	Payee address; City; State; Zip Code 39739 LBJ FREEWAY Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		ide of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 12/01/2019	Payee name Walmart		
Amount (\$) 58.33	Payee address; City; State; Zip Code 150 N I-35 Lancaster, TX 75146		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		ide of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEED	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 19 of 68	•	3 Filer ID (Ethics Commission Filers)
4 Date 11/19/2019	5 Payee name Walmart	
6 Amount (\$) 126.93	7 Payee address; City; State; Zip Code 150 N I-35 E Lancaster, TX 75146	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supplies
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 12/01/2019	Payee name Walmart	
Amount (\$) 96.73	Payee address; City; State; Zip Code 150 N 1-35 E Lancaster, TX 75146	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense donations
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 11/22/2019	Payee name Walmart	
Amount (\$) 141.07	Payee address; City; State; Zip Code 150 N 1-35 E Lancaster, TX 75146	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense donations
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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.
1 Total pages Schedule F1: 20 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 08/16/2019	5 Payee name Top Golf	,
6 Amount (\$) 16.23	7 Payee address; City; State; Zip Code 3787 Park Lane Dallas, TX 75231	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense donations
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 07/20/2019	Payee name Golf Galaxy	
Amount (\$) 237.59	Payee address; City; State; Zip Code 1001 W I-20 Arlington, TX 76017	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense donations
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 10/11/2019	Payee name Southern Methodist University	
Amount (\$) 254.34	Payee address; City; State; Zip Code 3060 Mockingbird Lane Dallas, TX 75205	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense donations
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	/Wages/Contract Labor Other (enter a category not listed above)	
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 21 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)	
4 Date 10/22/2019	5 Payee name SMU Barnes and Noble		
6 Amount (\$) 91.99	7 Payee address; City; State; Zip Code 3060 Mockingbird Lane Dallas, TX 75205		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense donations	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 11/27/2019	Payee name Party City		
Amount (\$) 24.95	Payee address; City; State; Zip Code 39739 LBJ Freeway Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense donations	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 12/21/2019	Payee name BT Furnishings		
Amount (\$) 378.85	Payee address; City; State; Zip Code 4350 Gannon Lane Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense donations	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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: 22 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 12/21/2019	5 Payee name Ross	·
6 Amount (\$) 21.63	7 Payee address; City; State; Zip Code 39739 LBJ Freeway Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense donations
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 12/17/2019	Payee name Sams Club	
Amount (\$) 58.92	Payee address; City; State; Zip Code 2900 W Wheatland Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense donations
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 07/03/2019	Payee name Hibachi Sushi Bar	
Amount (\$) 84.24	Payee address; City; State; Zip Code 416 N Highway 67 Cedar Hill, TX 75104	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 23 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 07/09/2019	5 Payee name Baby Back Shack	
6 Amount (\$) 28.84	7 Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 07/10/2019	Payee name Baby Back Shack	
Amount (\$) 32.15	Payee address; City; State; Zip Code 1800 S Akard Dallas, TX 75215	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 10/05/2019	Payee name Baby Back Shack	
Amount (\$) 28.30	Payee address; City; State; Zip Code 1800 S Akard Dallas, TX 75215	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1: 24 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)	
4 Date 10/11/2019	5 Payee name Baby Back Shack	·	
6 Amount (\$) 12.67	7 Payee address; City; State; Zip Code 1800 S Akard Dallas, TX 75215		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 10/24/2019	Payee name Baby Back Shack		
Amount (\$) 38.00	Payee address; City; State; Zip Code 1800 S Akard Dallas, TX 75215		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 10/25/2019	Payee name Baby Back Shack		
Amount (\$) 70.00	Payee address; City; State; Zip Code 1800 S Akard Dallas, TX 75215		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
	ATTACH ADDITIONAL COPIES OF THI	S SCHEDULE AS NEEDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 25 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/30/2019	5 Payee name Baby Back Shack	,
6 Amount (\$) 31.18	7 Payee address; City; State; Zip Code 1800 S Akard Dallas, TX 75215	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 11/18/2019	Payee name Baby Back Shack	
Amount (\$) 7.79	Payee address; City; State; Zip Code 1800 S Akard Dallas, TX 75215	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 08/31/2019	Payee name Braums	
Amount (\$) 29.40	Payee address; City; State; Zip Code 907 S Cocker Hill Duncanville, TX 75137	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (enter a suregery nectastica assister)
1 Total pages Schedule F1: 26 of 68	2 FILER NAME Tennell Atkins	3	Filer ID (Ethics Commission Filers)
4 Date 11/13/2019	5 Payee name Babes Chicken Dinner House		
6 Amount (\$) 67.05	7 Payee address; City; State; Zip Code 200 S Main Street Cedar Hill, TX 75104		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		le of Texas. Complete Schedule T. X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 07/26/2019	Payee name Chilis Grill		
Amount (\$) 21.96	Payee address; City; State; Zip Code 2503 W Wheatland Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		e of Texas. Complete Schedule T. K, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 11/05/2019	Payee name Chilis Grill		
Amount (\$) 34.28	Payee address; City; State; Zip Code 2503 W Wheatland Dallas, TX 75137		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		e of Texas. Complete Schedule T. K, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEED	ED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1: 27 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 12/06/2019	5 Payee name Chilis Grill		
6 Amount (\$) 53.52	7 Payee address; City; State; Zip Code 2503 W Wheatland Dallas, TX 75137		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Check if Austin	utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 08/04/2019	Payee name Colters BBQ		
Amount (\$) 16.13	Payee address; City; State; Zip Code 39904 W Camp WisdomDallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 09/12/2019	Payee name Colters BBQ		
Amount (\$) 28.74	Payee address; City; State; Zip Code 3904 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1: 28 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 10/01/2019	5 Payee name Colters BBQ		
6 Amount (\$) 22.68	7 Payee address; City; State; Zip Code 3904 W Camp Wisdom Dallas, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Check if Austin	utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 12/10/2019	Payee name Canvas Hotel Dallas		
Amount (\$) 117.99	Payee address; City; State; Zip Code 1325 S Lamar Dallas, TX 75215		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 09/13/2019	Payee name Churchs		
Amount (\$) 6.49	Payee address; City; State; Zip Code 1025 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 29 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/23/2019	5 Payee name Churchs	
6 Amount (\$) 9.81	7 Payee address; City; State; Zip Code 1025 W Camp Wisdom Dallas, TX 75232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 07/02/2019	Payee name Chubbys	
Amount (\$) 20.55	Payee address; City; State; Zip Code 7474 Cockrell Hill Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 09/10/2019	Payee name Chubbys	
Amount (\$) 22.47	Payee address; City; State; Zip Code 7474 Cockrell Hill Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	/Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 30 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 09/27/2019	5 Payee name Chubbys	·
6 Amount (\$) 15.24	7 Payee address; City; State; Zip Code 7474 Cockrell Hill Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 10/17/2019	Payee name Chubbys	
Amount (\$) 22.76	Payee address; City; State; Zip Code 7474 Cockrell Hill Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 10/28/2019	Payee name Chubbys	
Amount (\$) 12.27	Payee address; City; State; Zip Code 7474 Cockrell Hill Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 31 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 11/14/2019	5 Payee name Chubbys	,
6 Amount (\$) 36.91	7 Payee address; City; State; Zip Code 7474 Cockrell Hill Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 11/20/2019	Payee name Chubbys	
Amount (\$) 10.27	Payee address; City; State; Zip Code 7474 Cockrell Hill Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 07/02/2019	Payee name The Capital Grill	
Amount (\$) 227.33	Payee address; City; State; Zip Code 500 Crescent Ct Suite 13 Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 32 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 09/05/2019	5 Payee name The Capital Grill		
6 Amount (\$) 82.81	7 Payee address; City; State; Zip Code 500 Crescent Ct Suite 13 Dallas, TX 75201		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 09/13/2019	Payee name The Capital Grill		
Amount (\$) 224.08	Payee address; City; State; Zip Code 500 Crescent Ct Suite 13 Dallas, TX 75201		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 12/14/2019	Payee name Cashsaver		
Amount (\$) 4.36	Payee address; City; State; Zip Code 1201 W Camp Wisdom Dallas, TX 75248		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 33 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 08/19/2019	5 Payee name Chick Fil A	
6 Amount (\$) 8.22	7 Payee address; City; State; Zip Code 2429 W Wheatland Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 11/23/2019	Payee name Veracruz Cafe	
Amount (\$) 61.27	Payee address; City; State; Zip Code 1427 S Hwy 67 Cedar Hill, TX 75104	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 11/09/2019	Payee name Dickeys BBQ Pit	
Amount (\$) 52.87	Payee address; City; State; Zip Code 1001 N Beckley Suite 1 Desoto, TX 75115	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	Complete this form. Other (enter a category not listed above)
1 Total pages Schedule F1: 34 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/10/2019	5 Payee name Food Glo Food	1
6 Amount (\$) 7.00	7 Payee address; City; State; Zip Code 8303 Elmbrook Dallas, TX 75247	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 07/24/2019	Payee name Gonzalez Restauant	
Amount (\$) 42.87	Payee address; City; State; Zip Code 367 W Jefferson Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 08/22/2019	Payee name Grandy	
Amount (\$) 8.65	Payee address; City; State; Zip Code 3230 W Camp Wisdom Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Gredit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 35 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 11/19/2019	5 Payee name Jack in the Box		
6 Amount (\$) 19.67	7 Payee address; City; State; Zip Code 110 E Camp Wisdom Dallas, TX 75241		
PURPOSE OF EXPENDITURE 9 Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense Candidate / Officeholder name		utside of Texas. Complete Schedule T. n, TX, officeholder living expense Office held
expenditure to benefit C/OF	Tennell Atkins	Council District 8	
Date 07/21/2019	Payee name KFC		
Amount (\$) 13.82	Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 07/24/2019	Payee name KFC		
Amount (\$) 16.97	Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 36 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/26/2019	5 Payee name KFC		
6 Amount (\$) 8.65	7 Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 07/30/2019	Payee name KFC		
Amount (\$) 17.16	Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 08/09/2019	Payee name KFC		
Amount (\$) 8.65	Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 37 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 08/16/2019	5 Payee name KFC		
6 Amount (\$) 16.53	7 Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 08/23/2019	Payee name KFC		
Amount (\$) 25.71	Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 08/30/2019	Payee name KFC		
Amount (\$) 17.61	Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 38 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 09/13/2019	5 Payee name KFC		
6 Amount (\$) 8.65	7 Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 09/27/2019	Payee name KFC		
Amount (\$) 27.05	Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 10/11/2019	Payee name KFC		
Amount (\$) 19.13	Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 39 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 10/15/2019	5 Payee name KFC		
6 Amount (\$) 9.23	7 Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 10/18/2019	Payee name KFC		
Amount (\$) 17.61	Payee address; City; State; Zip Code 34115 W Camp WisdomDallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 11/01/2019	Payee name KFC		
Amount (\$) 17.61	Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 40 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 11/20/2019	5 Payee name KFC		
6 Amount (\$) 8.65	7 Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T.
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 12/08/2019	Payee name KFC		
Amount (\$) 9.72	Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 12/11/2019	Payee name KFC		
Amount (\$) 10.91	Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 41 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/12/2019	5 Payee name LUBYS		
6 Amount (\$) 23.25	7 Payee address; City; State; Zip Code 5600 S HAMPTON DALLAS, TX 75232		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Food/Beverage Expense	Check if travel o	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
07/23/2019	LUBYS		
Amount (\$) 21.82	Payee address; City; State; Zip Code 5600 S HAMPTON DALLAS, TX 75232		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Food/Beverage Expense		utside of Texas. Complete Schedule T. 1, TX, officeholder living expense
EXPENDITURE		food	, 1A, Unicertaider living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date 08/07/2019	Payee name LUBYS		
Amount (\$) 43.25	Payee address; City; State; Zip Code 5600 S HAMPTON DALLAS, TX 75232		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Food/Beverage Expense		utside of Texas. Complete Schedule T.
EXPENDITURE		food	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	cale. (e.i.e. a calegory necleon ascre)
1 Total pages Schedule F1: 42 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 08/08/2019	5 Payee name LUBYS		
6 Amount (\$) 18.91	7 Payee address; City; State; Zip Code 5600 S HAMPTON DALLAS, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 09/11/2019	Payee name LUBYS		
Amount (\$) 17.83	Payee address; City; State; Zip Code 5600 S HAMPTON DALLAS, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 09/14/2019	Payee name LUBYS		
Amount (\$) 17.30	Payee address; City; State; Zip Code 5600 S HAMPTON DALLAS, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Gredit Card Payment	The Instruction Guide explains how to	o complete this form.	
1 Total pages Schedule F1: 43 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers))
4 Date 11/19/2019	5 Payee name LUBYS		
6 Amount (\$) 11.36	7 Payee address; City; State; Zip Code 5600 S HAMPTON DALLAS, TX 75232		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense Candidate / Officeholder name	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food Office sought Office held	
9 Complete ONLY if direct expenditure to benefit C/OF		Council District 8	
Date 12/06/2019	Payee name LUBYS		
Amount (\$) 44.53	Payee address; City; State; Zip Code 5600 S HAMPTON DALLAS, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 12/10/2019	Payee name LUBYS		
Amount (\$) 23.25	Payee address; City; State; Zip Code 5600 S HAMPTON DALLAS, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
	ATTACH ADDITIONAL COPIES OF THIS	IS SCHEDULE AS NEEDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	care (errer a category not listed above)
1 Total pages Schedule F1: 44 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 12/19/2019	5 Payee name LUBYS		
6 Amount (\$) 23.24	7 Payee address; City; State; Zip Code 5600 S HAMPTON DALLAS, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 12/22/2019	Payee name LUBYS		
Amount (\$) 12.97	Payee address; City; State; Zip Code 5600 S HAMPTON DALLAS, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ide of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 08/29/2019	Payee name Lisa Soul Food		
Amount (\$) 35.98	Payee address; City; State; Zip Code 2550 W Red Bird Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ide of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEED	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 45 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/21/2019	5 Payee name Lisa Soul Food Cafe	
6 Amount (\$) 38.69	7 Payee address; City; State; Zip Code 2550 W Red Bird Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 12/04/2019	Payee name Lisa Soul Food Cafe	
Amount (\$) 17.59	Payee address; City; State; Zip Code 2550 W Red Bird Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 10/25/2019	Payee name Louisana Famous	
Amount (\$) 7.57	Payee address; City; State; Zip Code 4001 W Wheatland Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	45575)
1 Total pages Schedule F1: 46 of 68	•	3 Filer ID (Ethics Commiss	ion Filers)
4 Date 11/07/2019	5 Payee name Louisana Famous		
6 Amount (\$) 21.39	7 Payee address; City; State; Zip Code 4001 W Wheatland Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office he Council District 8	ld
Date 10/25/2019	Payee name Louisana Famous		
Amount (\$) 41.08	Payee address; City; State; Zip Code 4001 W Wheatland Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office he Council District 8	ld
Date 07/13/2019	Payee name McDonalds		
Amount (\$) 17.72	Payee address; City; State; Zip Code 8435 S Hampton Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office he Council District 8	eld
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 47 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 08/17/2019	5 Payee name McDonalds	·
6 Amount (\$) 12.54	7 Payee address; City; State; Zip Code 8435 S Hampton Dallas, TX 75232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 08/24/2019	Payee name McDonalds	
Amount (\$) 17.71	Payee address; City; State; Zip Code 8435 S Hampton Dallas, TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 07/09/2019	Payee name Methodist Health System	
Amount (\$) 23.60	Payee address; City; State; Zip Code 1441 N Beckley Dallas, TX 75203	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 48 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 12/13/2019	5 Payee name Methodist Dallas Medical Center	
6 Amount (\$) 12.33	7 Payee address; City; State; Zip Code 1441 N Beckley Dallas, TX 75203	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 10/17/2019	Payee name Soulmans BBQ	
Amount (\$) 14.74	Payee address; City; State; Zip Code 8018 S Lancaster Dallas, TX 75241	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 09/13/2019	Payee name Olive Garden	
Amount (\$) 31.67	Payee address; City; State; Zip Code 639 N Cockrell Hill Duncanville, TX 75137	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 49 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 11/01/2019	5 Payee name Olive Garden	,
6 Amount (\$) 32.73	7 Payee address; City; State; Zip Code 639 N Cockrell Hill Duncanville, TX 75137	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 08/29/2019	Payee name Omni Dallas	
Amount (\$) 12.39	Payee address; City; State; Zip Code 555 S Lamar Dallas, TX 75202	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 09/07/2019	Payee name Off the Bone BBQ	
Amount (\$) 66.03	Payee address; City; State; Zip Code 1734 S Lamar Dallas, TX 75215	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 50 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 12/03/2019	5 Payee name Odoms BBQ	
6 Amount (\$) 56.24	7 Payee address; City; State; Zip Code 810 Oriole Blvd Duncanville, TX 75137	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 10/16/2019	Payee name Pappadeaux Seafood Kitchen	
Amount (\$) 54.29	Payee address; City; State; Zip Code 800 E Hwy 67 Duncanville, TX 75137	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 10/20/2019	Payee name Pappadeaux	
Amount (\$) 26.03	Payee address; City; State; Zip Code 800 E Hwy 67 Duncanville, TX 75137	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	l Committee Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide expl	ains how to complete this form.	
1 Total pages Schedule F1: 51 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 11/11/2019	5 Payee name Pappadeaux		
6 Amount (\$) 47.52	7 Payee address; City; State; 800 E Hwy 67 Duncanville, T	·	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Food/Beverage Expense	Check if travel o	utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 11/12/2019	Payee name Pappadeaux		
Amount (\$) 54.29	Payee address; City; State; 800 E Hwy 67 Duncanville, T		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of th Food/Beverage Expense	Check if travel or	utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 12/08/2019	Payee name Pappadeaux		
Amount (\$) 18.13	Payee address; City; State; 800 E Hwy 67 Duncanville, T		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of th Food/Beverage Expense	Check if travel or	utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 52 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/01/2019	5 Payee name Pizza Hut		
6 Amount (\$) 10.59	7 Payee address; City; State; Zip Code 3333 W Camp Wisdom Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 07/24/2019	Payee name Pizza Hut		
Amount (\$) 47.61	Payee address; City; State; Zip Code 3333 W Camp Wisdom Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 11/23/2019	Payee name Pizza Hut		
Amount (\$) 23.80	Payee address; City; State; Zip Code 3333 W Camp Wisdom Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	earer (errer a satisfier) necreated above,
1 Total pages Schedule F1: 53 of 68	•		3 Filer ID (Ethics Commission Filers)
4 Date 11/30/2019	5 Payee name Starbucks Coffee		
6 Amount (\$) 125.00	7 Payee address; City; State; Zip Code 3620 W Camp Wisdom Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 12/03/2019	Payee name Starbucks Coffee		
Amount (\$) 9.96	Payee address; City; State; Zip Code 3620 W Camp Wisdom Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 12/05/2019	Payee name Starbucks Coffee		
Amount (\$) 15.32	Payee address; City; State; Zip Code 3620 W Camp Wisdom Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Gredit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 54 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 12/10/2019	5 Payee name Starbucks Coffee		
6 Amount (\$) 200.00	7 Payee address; City; State; Zip Code 3620 W Camp Wisdom Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 12/11/2019	Payee name Starbucks Coffee		
Amount (\$) 20.03	Payee address; City; State; Zip Code 3620 W Camp Wisdom Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 12/15/2019	Payee name Starbucks Coffee		
Amount (\$) 9.63	Payee address; City; State; Zip Code 3620 W Camp Wisdom Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 55 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 12/17/2019	5 Payee name Starbucks Coffee	
6 Amount (\$) 20.68	7 Payee address; City; State; Zip Code 3620 W Camp Wisdom Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 12/23/2019	Payee name Starbucks Coffee	
Amount (\$) 20.46	Payee address; City; State; Zip Code 3620 W Camp Wisdom Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 07/20/2019	Payee name Sams Club	
Amount (\$) 476.16	Payee address; City; State; Zip Code 2900 W Wheatland Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food and supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Sal	aries/Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains ho	w to complete this form.
1 Total pages Schedule F1: 56 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 11/24/2019	5 Payee name Sams Club	·
6 Amount (\$) 423.66	7 Payee address; City; State; Zip Co 2900 W Wheatland Dallas, TX 75237	ode
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this scheduled Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 07/15/2019	Payee name Sigels	
Amount (\$) 40.57	Payee address; City; State; Zip Co 5066 Riverfront Dallas, TX 75207	ode
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense beverages
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 07/31/2019	Payee name Saltgrass Steak House	
Amount (\$) 60.14	Payee address; City; State; Zip Co. 747 Hwy 67 Cedar Hill, TX 75104	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this scheduled Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salarie	es/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: 57 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 11/14/2019	5 Payee name Soulman BBQ	
6 Amount (\$) 37.94	7 Payee address; City; State; Zip Code 8018 S Lancaster Dallas, TX 75241	Э
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 09/24/2019	Payee name South Dallas Cafe	
Amount (\$) 32.65	Payee address; City; State; Zip Code 7035 Hwy 67 Dallas, TX 75237	9
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 07/15/2019	Payee name The Island Spot	
Amount (\$) 26.47	Payee address; City; State; Zip Code 309 W Jefferson Dallas, TX 75208	e
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF TH	IIS SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 58 of 68	•	3 Filer ID (Ethics Commission Filers)
4 Date 07/02/2019	5 Payee name Tom Thumb	
6 Amount (\$) 54.06	7 Payee address; City; State; Zip Code Duncanville, TX 75116	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 08/13/2019	Payee name Tiny Victories	
Amount (\$) 19.49	Payee address; City; State; Zip Code 604 N Tyler St Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 08/12/2019	Payee name The Network Bar	
Amount (\$) 47.64	Payee address; City; State; Zip Code 331 Singleton Blvd Dallas, TX 75212	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1: 59 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 08/10/2019	5 Payee name Taco Bell		
6 Amount (\$) 15.28	7 Payee address; City; State; Zip Code 2972 W Wheatland Dallas, TX 75237		
PURPOSE OF EXPENDITURE 9 Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense Candidate / Officeholder name		utside of Texas. Complete Schedule T. n, TX, officeholder living expense Office held
expenditure to benefit C/OF		Council District 8	
Date 07/08/2019	Payee name Rice Garden		
Amount (\$) 18.30	Payee address; City; State; Zip Code 4016 W Camp Wisdom Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 07/26/2019	Payee name Wingstop		
Amount (\$) 33.11	Payee address; City; State; Zip Code 3333 W Camp Wisdom Shaldak (16 X 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 60 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)	
4 Date 12/14/2019	5 Payee name Wingstop		
6 Amount (\$) 49.57	7 Payee address; City; State; Zip Code 3333 W Camp Wisdom Shalleak (NGX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 07/26/2019	Payee name Wendys		
Amount (\$) 20.21	Payee address; City; State; Zip Code 510 S Beckley Dallas, TX 75203		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date 07/29/2019	Payee name Wendys		
Amount (\$) 17.40	Payee address; City; State; Zip Code 510 S Beckley Dallas, TX 75203		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1: 61 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)		
4 Date 12/16/2019	5 Payee name Whole Foods Market	,		
6 Amount (\$) 50.09	7 Payee address; City; State; Zip Code 2510 McKinney Ave Dallas, TX 75201			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
Date	Payee name			
09/05/2019	Veracruz Cafe			
Amount (\$) 37.22	Payee address; City; State; Zip Code 1427 S Hwy 67 Cedar Hill, TX 75104			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
Date 07/01/2019	Payee name Jefferson Monument LLC			
Amount (\$) 350.00	Payee address; City; State; Zip Code 1320 Manufacture St Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense rent		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1: 62 of 68	•		3 Filer ID (Ethics Commission Filers)	
4 Date 08/12/2019	5 Payee name Jefferson Monument LLC			
6 Amount (\$) 350.00	7 Payee address; City; State; Zip Code 1320 Manufacture St Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date 09/12/2019	Payee name q Jefferson Monument LLC			
Amount (\$) 350.00	Payee address; City; State; Zip Code 1320 Manufacture St Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date 10/01/2019	Payee name Jefferson Monument LLC			
Amount (\$) 350.00	Payee address; City; State; Zip Code 1320 Manufacture Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	/Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 63 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 11/01/2019	5 Payee name Jefferson Monument LLC	
6 Amount (\$) 350.00	7 Payee address; City; State; Zip Code 1320 Manfacture St Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense rent
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H Tennell Atkins	Office sought Office held Council District 8
Date 12/01/2019	Payee name Jefferson Monument LLC	
Amount (\$) 350.00	Payee address; City; State; Zip Code 1320 Manufacture St Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense rent
Complete ONLY if direct expenditure to benefit C/Ol	Candidate / Officeholder name H Tennell Atkins	Office sought Office held Council District 8
Date 07/15/2019	Payee name AT&T	
Amount (\$) 460.00	Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1: 64 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)		
4 Date 08/15/2019	5 Payee name AT&T			
6 Amount (\$) 502.00	7 Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense phone		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
Date 09/15/2019	Payee name AT&T			
Amount (\$) 440.00	Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense phone		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
Date 10/15/2019	Payee name AT&T			
Amount (\$) 560.00	Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense phone		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1: 65 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)		
4 Date 11/15/2019	5 Payee name AT&T	·		
6 Amount (\$) 465.00	7 Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense phone		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
Date 12/15/2019	Payee name AT&T			
Amount (\$) 540.00	Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense phone		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
Date 07/26/2019	Payee name Reilly Echols Printing Inc			
Amount (\$) 1000.00	Payee address; City; State; Zip Code 1710 S Harwood St Dallas, TX 75215			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense printing		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1: 66 of 68	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)		
4 Date 07/03/2019	5 Payee name Extra Space Storage	·		
6 Amount (\$) 220.00	7 Payee address; City; State; Zip Code 39050 LBJ Frwy Dallas, TX 75232			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense storage		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
Date 08/03/2019	Payee name Extra Space Storage			
Amount (\$) 220.00	Payee address; City; State; Zip Code 39050 LBJ Frwy Dallas, TX 75232			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense storage		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
Date 09/03/2019	Payee name Extra Space Storage			
Amount (\$) 220.00	Payee address; City; State; Zip Code 39050 LBJ Frwy Dallas, TX 75232			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1: 67 of 68	2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 10/03/2019	5 Payee name Extra Space Storage			
6 Amount (\$) 220.00	7 Payee address; 39050 LBJ Frwy	City; State; Zip Code Dallas, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories Office Overhead/Rental			utside of Texas. Complete Schedule T. 1, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeho Tennell Atkins	lder name	Office sought Council District 8	Office held
Date 11/03/2019	Payee name Extra Space Storage			
Amount (\$) 220.00	Payee address; 39050 LBJ Frwy	City; State; Zip Code Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories Office Overhead/Rental	listed at the top of this schedule) Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officehol Tennell Atkins	der name	Office sought Council District 8	Office held
Date 12/03/2019	Payee name Extra Space Storage			
Amount (\$) 220.00	Payee address; 39050 LBJ Frwy	City; State; Zip Code Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories Office Overhead/Rental	listed at the top of this schedule) Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeho Tennell Atkins	lder name	Office sought Council District 8	Office held
	ATTACH ADDIT	IONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 68 of 68	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 09/01/2019	5 Payee name Liberty Mutual Insurance		
6 Amount (\$) 444.00	7 Payee address; City; State; Zip Code P.O. Box 958416 Lake Mary, FL 32795-995	9	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 07/02/2019	Payee name Thats Great News		
Amount (\$) 228.07	Payee address; City; State; Zip Code P.O. Box 5021 Wallingford, CT 06492		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense new letter campaign	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 08/06/2019	Payee name Tennell Atkins		
Amount (\$) 15000.00	Payee address; City; State; Zip Code 2717 Meadow Stone Lan Ballas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		ide of Texas. Complete Schedule T. TX, officeholder living expense sement
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			