

Supplemental Report Officeholder

FORM Cover Sheet SR

1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Chad	MI		2. Total Pages Filed: 129
	NICKNAME	LAST West	SUFFIX		3. Office Held Council District 1
4. SUPPLEMENTAL REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report				
5. PERIOD / COVERED	7/1/2024 THROUGH 12/31/2024				
6. ELECTION	Month Day Year 5/3/2025 <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> N/A				
7. OFFICE-HOLDER	CONTRIBUTION TOTALS		1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
			2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 36,050.00
	EXPENDITURE TOTALS		3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00
			4. TOTAL OFFICEHOLDER EXPENDITURES		\$ 36,277.62
8. POLITICAL (Campaign)	CONTRIBUTION TOTALS		5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
			6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 92,000.00
	EXPENDITURE TOTALS		7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 0.00
			8. TOTAL POLITICAL EXPENDITURES		\$ 14,784.45
9. OFFICEHOLDER FUNDS USED FOR CAMPAIGN PURPOSES			9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIBUTIONS USED FOR CAMPAIGN EXPENDITURES DURING THE REPORTING PERIOD		\$ 0.00
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> 10. AFFIDAVIT AFFIX NOTARY STAMP / SEAL ABOVE </div> <div style="width: 55%; text-align: center;"> I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election code. ***ELECTRONICALLY CERTIFIED*** _____ Signature of Candidate or Officeholder </div> </div>					
Sworn to and subscribed before me, by the said <u>Chad West</u> , this the <u>15th</u> day of <u>January</u> , 20 <u>25</u> , to certify which, witness my hand and seal of office.					
<div style="display: flex; justify-content: space-between;"> <div>Signature of officer administering oath</div> <div>Printed name of officer administering oath</div> <div>Title of officer administering oath</div> </div>					

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

07/09/2024

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jeff Carey

7 Amount of contribution (\$)

1000.00

6 Contributor address; City; State; Zip Code
300 E Round Grove Road Suite 621 Lewisville, TX 75067

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/12/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ryan Behring

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code
1044 Burlington Blvd Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/24/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Gair

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code
2200 Ross Avenue Suite 2800 Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/25/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bruce Reid

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code
71 S Wacker Drive Suite 2750 Chicago, IL 60606

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
2 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

07/29/2024

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Daniel Huerta

7 Amount of contribution (\$)

250.00

6 Contributor address;

1414 Cedar Hill Avenue

City;

Dallas, TX 75208

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/29/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dominic Perry

Amount of contribution (\$)

100.00

Contributor address;

12801 N Central Expressway Suite 1075 Dallas, TX 75243

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/29/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James Mathis

Amount of contribution (\$)

250.00

Contributor address;

2029 W Colorado Blvd

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/29/2024

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jane Weempe

Amount of contribution (\$)

1000.00

Contributor address;

1316 Canterbury Court

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

07/29/2024

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joseph Pitchford

7 Amount of contribution (\$)

100.00

6 Contributor address;

742 Midbury

City;

Dallas, TX 75230

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/29/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Marc Andres

Amount of contribution (\$)

500.00

Contributor address;

2800 N Henderson Ave Suite 200

Dallas, TX 75206

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/31/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James Neil Jr

Amount of contribution (\$)

1000.00

Contributor address;

2727 LBJ Freeway Suite 600

Dallas, TX 75234

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/02/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mary Ann Jenkins

Amount of contribution (\$)

100.00

Contributor address;

744 S Manus Drive

Dallas, TX 75224

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

08/08/2024

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tyler Woodruff

6 Contributor address;

4848 Lemmon Ave

City;

Dallas, TX 75219

State; Zip Code

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/09/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jennifer Hargrave

Contributor address;

4201 Spring Valley Road Suite 1210 Dallas, TX 75244

City;

State; Zip Code

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/11/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Elisa Goodwin

Contributor address;

2310 Broken Point

City;

McKinney, TX 75072

State; Zip Code

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/11/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joseph Dingman

Contributor address;

13223 Glad Acres Drive

City;

Dallas, TX 75234

State; Zip Code

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
5 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

08/12/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Hurst

7 Amount of contribution (\$)

100.00

Campaign
Contribution

6 Contributor address;

2100 Ross Avenue Suite 2700

City;

Dallas, TX 75201

State;

Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/14/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Samuel Herskovits

Amount of contribution (\$)

1000.00

Campaign
Contribution

Contributor address;

6214 Prestoncrest Lane

City;

Dallas, TX 75230

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/16/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jennifer Marrinucci

Amount of contribution (\$)

500.00

Campaign
Contribution

Contributor address;

2217 Ivan Street Suite 201

City;

Dallas, TX 75201

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/17/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bob Meckfessel

Amount of contribution (\$)

250.00

Campaign
Contribution

Contributor address;

1427 Haines Avenue

City;

Dallas, TX 75208

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 08/17/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sam McDonald 6 Contributor address; City; State; Zip Code 5484 State Highway 276 Point, TX 75472	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/19/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tim Attlee Contributor address; City; State; Zip Code 8751 Collin McKinney Parkway Suite 1405 McKinney, TX 75070	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/21/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alex Pace Contributor address; City; State; Zip Code 400 N Ervay Suite 230 Dallas, TX 75201	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/21/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross Love Contributor address; City; State; Zip Code 4911 W Lovers Lane Dallas, TX 75209	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 08/22/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aris Tsiakos 6 Contributor address; City; State; Zip Code 5224 Springmeadow Drive Dallas, TX 75229	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/23/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford Braly Contributor address; City; State; Zip Code 300 Throckmorton Street Suite 1500 Fort Worth, TX 76102	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/25/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doug Banerjee Contributor address; City; State; Zip Code 6911 Ellsworth Avenue Dallas, TX 75214	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/26/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amber Gurney Contributor address; City; State; Zip Code 6001 Windhaven Parkway Suite 100 Plano, TX 75093	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

08/26/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris Bragg

Campaign
Contribution

6 Contributor address;

6401 Widgeon Drive

City;

Plano, TX 75024

State; Zip Code

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/26/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Preziosi

Campaign
Contribution

Contributor address;

2229 Lawndale Drive

City;

Dallas, TX 75211

State; Zip Code

Amount of contribution (\$)

150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/26/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Hudson Henley

Officeholder
Contribution

Contributor address;

2520 Fairmount Street Suite 200

City;

Dallas, TX 75201

State; Zip Code

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/26/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kim Henley

Officeholder
Contribution

Contributor address;

2520 Fairmount Street Suite 200

City;

Dallas, TX 75201

State; Zip Code

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
9 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

08/26/2024

Officeholder
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kim Henley

7 Amount of contribution (\$)

500.00

6 Contributor address;

City;

State;

Zip Code

2520 Fairmount Street Suite 200 Dallas, TX 75208

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/26/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Valerie Weatherwax

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

1000 Oak Hill Park Kennedale, TX 76060

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Alfred Crozier

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

517 Beacon Hill Drive CoppeCoppell, TX 75019

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ariel Marin

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

3134 Ross Avenue Suite 2 Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 08/27/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin Campos 6 Contributor address; City; State; Zip Code 428 W Davis St Suite 3 Dallas, TX 75208	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/27/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel Hartnett Contributor address; City; State; Zip Code 5848 Prospect Avenue Dallas, TX 75206	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dave Rendon Contributor address; City; State; Zip Code 4565 Claire Chennault St Suite 204 Addison, TX 75001	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dayna Moser Contributor address; City; State; Zip Code 4231 Ridge Dallas, TX 75229	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 08/27/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don Shugart 6 Contributor address; City; State; Zip Code 8891 Southwestern Blvd Suite 235 Dallas, TX 75206	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/27/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don Weempe Contributor address; City; State; Zip Code 1316 Canterbury Court Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ed Gough Contributor address; City; State; Zip Code 2021 Olive Street Suite 798 Dallas, TX 75201	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geoffrey Henley Contributor address; City; State; Zip Code 4304 Beverly Drive Dallas, TX 75205	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 08/27/2024 Officeholder Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geoffrey Henley 6 Contributor address; City; State; Zip Code 4304 Beverly Drive Dallas, TX 75205	7 Amount of contribution (\$) 1500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/27/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jody Bland Contributor address; City; State; Zip Code 5556 Richard Avenue Dallas, TX 75206	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joel Elony Contributor address; City; State; Zip Code 60001 Windhaven Parkway Suite 100Plano, TX 75093	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Carden Contributor address; City; State; Zip Code 2007 Harlandale Avenue Dallas, TX 75216	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
13 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

08/27/2024

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robert Wright

7 Amount of contribution (\$)

250.00

6 Contributor address;

2361 Allen Street

City;

Dallas, TX 75204

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/27/2024

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ingrid Crow

Amount of contribution (\$)

2500.00

Contributor address;

11834 Harry Hines Blvd Suite 135 Dallas, TX 75234

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ryan Patterson

Amount of contribution (\$)

250.00

Contributor address;

1215 Stafford Street

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Veronica Attlee

Amount of contribution (\$)

1000.00

Contributor address;

8751 Collin McKinney Parkway Suite 1005 McKinney, TX 75070

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 08/27/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winfred Sardar 6 Contributor address; City; State; Zip Code 7000 Nueces Drive Irving, TX 75029	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/28/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Ebert Contributor address; City; State; Zip Code 5209 Heritage Avenue Suite 510 Colleyville, TX 76034	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Helstowski Contributor address; City; State; Zip Code 5209 Heritage Avenue Suite 510 Colleyville, TX 76034	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/05/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keith Dilling Contributor address; City; State; Zip Code 13208 Meandering Way Dallas, TX 75240	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
15 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

09/08/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Pam Gerber

Campaign
Contribution

6 Contributor address;
4435 Holland Avenue

City; State; Zip Code
Dallas, TX 75219

7 Amount of contribution (\$)
250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

09/20/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tom Huth

Campaign
Contribution

Contributor address;
13455 Noel Road Suite 400

City; State; Zip Code
Dallas, TX 75240

Amount of contribution (\$)
1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/20/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tom Huth

Officeholder
Contribution

Contributor address;
13455 Noel Road Suite 400

City; State; Zip Code
Dallas, TX 75240

Amount of contribution (\$)
1500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joseph Pitchford

Campaign
Contribution

Contributor address;
7422 Midbury

City; State; Zip Code
Dallas, TX 75230

Amount of contribution (\$)
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 16 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 09/25/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger Wedell 6 Contributor address; City; State; Zip Code 1318 Elmwood Blvd Dallas, TX 75224	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/02/2024 Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Moritz Contributor address; City; State; Zip Code P.O. Box 490 Arlington, TX 76004	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/03/2024 Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harold Ginsburg Contributor address; City; State; Zip Code 2610 Fairmount Street Dallas, TX 75201	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/03/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell Voss Contributor address; City; State; Zip Code 300 Crescent Court Suite 1800 Dallas, TX 75201	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 17 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 10/04/2024 Campaign Contribution	5 Full name of contributor Tyler Scovell out-of-state PAC (ID#:) 6 Contributor address; City; State; Zip Code 7034 Alexander Drive Dallas, TX 75214	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/06/2024 Campaign Contribution	Full name of contributor Scott Rohrman out-of-state PAC (ID#:) Contributor address; City; State; Zip Code 3720 Marquette Street Dallas, TX 75225	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024 Campaign Contribution	Full name of contributor Matt Enzler out-of-state PAC (ID#:) Contributor address; City; State; Zip Code 6027 Goliad Avenue Dallas, TX 75206	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/2024 Campaign Contribution	Full name of contributor Kathleen Davis out-of-state PAC (ID#:) Contributor address; City; State; Zip Code 1218 N Winnetka Avenue Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 10/13/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd Princeton 6 Contributor address; City; State; Zip Code 2816 Southwood Drive Dallas, TX 75233	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/14/2024 Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feargal McKinney Contributor address; City; State; Zip Code 5722 Oram Street Dallas, TX 75206	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marilee OConnell Contributor address; City; State; Zip Code 634 Kessler Reserve Court Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2024 Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matt Segrest Contributor address; City; State; Zip Code 6935 Meadow Lake Ave Dallas, TX 75214	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 19 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 10/14/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger Wedell 6 Contributor address; City; State; Zip Code 1318 Elmwood Blvd Dallas, TX 75224	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/14/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade Johns Contributor address; City; State; Zip Code 6964 Westlake Avenue Dallas, TX 75214	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren Andres Contributor address; City; State; Zip Code 3710 Rawlins Street Dallas, TX 75219	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley Olmstead Contributor address; City; State; Zip Code 7110 Olmstead Drive Dallas, TX 75254	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 20 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 10/15/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debra Guerrero 6 Contributor address; City; State; Zip Code 2915 Skylark San Antonio, TX 78210	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/15/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edith Diaz Contributor address; City; State; Zip Code 1639 Junior Drive Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024 Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edith Diaz Contributor address; City; State; Zip Code 1639 Junior Drive Dallas, TX 75208	Amount of contribution (\$) 1500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Effie Dennison Contributor address; City; State; Zip Code 1303 Woodlawn Avenue Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
21 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

10/15/2024

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ingrid Crow

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City;

State;

Zip Code

11834 Harry Hines Blvd Suite 135 Dallas, TX 75234

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/15/2024

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ingrid Crow

Amount of contribution (\$)

1000.00

Contributor address;

City;

State;

Zip Code

11834 Harry Hines Blvd Suite 135 Dallas, TX 75234

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/15/2024

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jane Weempe

Amount of contribution (\$)

1000.00

Contributor address;

City;

State;

Zip Code

1316 W Canterbury Court Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/15/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jason Arechinga

Amount of contribution (\$)

200.00

Contributor address;

City;

State;

Zip Code

22603 Impala Bend San Antonio, TX 78259

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 10/15/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jay Heller 6 Contributor address; City; State; Zip Code 2165 East Maya Palm Drive Boca Raton, FL 33432	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/15/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newt Walker Contributor address; City; State; Zip Code 2519 Thomas Avenue Dallas, TX 75201	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nick Walsh Contributor address; City; State; Zip Code 3200 McKinney Avenue Suite 701 Dallas, TX 75204	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pasha Heidari Contributor address; City; State; Zip Code 3020 Greenville Avenue Dallas, TX 75206	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 23 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 10/15/2024 Officeholder Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pasha Heidari ----- 6 Contributor address; City; State; Zip Code 3020 Greenville Avenue Dallas, TX 75206	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/15/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Wright ----- Contributor address; City; State; Zip Code 2361 Allen Street Dallas, TX 75204	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024 Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Syd Hurley ----- Contributor address; City; State; Zip Code 2227 Vantage Street Dallas, TX 75207	Amount of contribution (\$) 5000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tony Shidid ----- Contributor address; City; State; Zip Code 6208 Copperhill Drive Dallas, TX 75248	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 24 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 10/16/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arthur Santa Maria 6 Contributor address; City; State; Zip Code 785 Huntingdon Street Coppell, TX 75019	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/16/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Goldstein Contributor address; City; State; Zip Code 10115 Kirkhaven Drive Dallas, TX 75238	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd Petty Contributor address; City; State; Zip Code 2808 Fairmount Street Suite 100 Dallas, TX 75201	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrea Mayes Contributor address; City; State; Zip Code 206 Park Ridge Blvd Southlake, TX 76092	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 25 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 10/18/2024 Officeholder Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank Conrad 6 Contributor address; City; State; Zip Code 411 W 24th Street New York, NY 10011	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/18/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herbert Weitzman Contributor address; City; State; Zip Code 3102 Maple Avenue Suite 500 Dallas, TX 75201	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe McElroy Contributor address; City; State; Zip Code 1207 Eldorado Avenue Dallas, TX 75208	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024 Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe McElroy Contributor address; City; State; Zip Code 1207 Eldorado Avenue Dallas, TX 75208	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 26 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 10/18/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payton Mayes 6 Contributor address; City; State; Zip Code 206 Park Ridge Blvd Southlake, TX 76092	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/23/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Suarez Contributor address; City; State; Zip Code 907 Stevens Wood Court Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2024 Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Suarez Contributor address; City; State; Zip Code 907 Stevens Wood Court Dallas, TX 75208	Amount of contribution (\$) 4000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Lamkin Contributor address; City; State; Zip Code 6201 W Plano Pkwy Suite 100 Plano, TX 75092	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
27 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

10/28/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mariam Andersen

7 Amount of contribution (\$)

500.00

Campaign
Contribution

6 Contributor address;

903 Stevens Woods Court

City;

Dallas, TX 75208

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/29/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Blewett

Amount of contribution (\$)

1000.00

Campaign
Contribution

Contributor address;

6228 Vickery Blvd

City;

Dallas, TX 75214

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/30/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Phil Wise

Amount of contribution (\$)

1000.00

Campaign
Contribution

Contributor address;

4514 Travis Street Suite 326

City;

Dallas, TX 75205

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/14/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Feargal McKinney

Amount of contribution (\$)

1000.00

Officeholder
Contribution

Contributor address;

5722 Oram Street

City;

Dallas, TX 75206

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 11/14/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven Meisel 6 Contributor address; City; State; Zip Code 3637 Haynie Avenue Dallas, TX 75205	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/15/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cullen Finnegan Contributor address; City; State; Zip Code 8117 Preston Road Suite 600 Dallas, TX 75225	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan Holloway Contributor address; City; State; Zip Code 8906 Stanwood Drive Dallas, TX 75228	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adam Jones Contributor address; City; State; Zip Code 20238 Marimac Trinidad, TX 75163	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
29 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

11/18/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Adrian Iglesias

7 Amount of contribution (\$)

1000.00

Campaign
Contribution

6 Contributor address;

5822 Gallant Run Suite 120

City;

Frisco, TX 75033

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/18/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brannon Albritton

Amount of contribution (\$)

50.00

Campaign
Contribution

Contributor address;

6941 Dalhart Lane

City;

Dallas, TX 75214

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/18/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carson Elvis

Amount of contribution (\$)

100.00

Campaign
Contribution

Contributor address;

2500 Bennett Avenue Suite 1314

City;

Dallas, TX 75206

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/18/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Cole Wade

Amount of contribution (\$)

100.00

Campaign
Contribution

Contributor address;

3326 Conroe Street

City;

Dallas, TX 75212

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 30 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 11/18/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eric Brown 6 Contributor address; City; State; Zip Code 6316 Brimwood Drive Plano, TX 75093	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/18/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris McKay Contributor address; City; State; Zip Code 5949 Sherry Lane Suite 1500 Dallas, TX 75225	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamie Walk Contributor address; City; State; Zip Code 6327 Brook Lake Drive Dallas, TX 75248	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeremiah Dover Contributor address; City; State; Zip Code 10014 Estacado Drive Dallas, TX 75228	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 31 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 11/18/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Merrick Egan 6 Contributor address; City; State; Zip Code 3420 Rosedale Avenue Suite 7 Dallas, TX 75205	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/18/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jon Altschuler Contributor address; City; State; Zip Code 1601 Elm Street Suite 3130 Dallas, TX 75201	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jon Leach Contributor address; City; State; Zip Code 300 S Pearl Street Suite 200 Dallas, TX 75201	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyle Dixon Contributor address; City; State; Zip Code 4654 Beverly Drive Dallas, TX 75209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 32 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 11/18/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauren Black 6 Contributor address; City; State; Zip Code 751 Kessler Lake Drive Dallas, TX 75208	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/18/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perren Gasc Contributor address; City; State; Zip Code 6716 Churchill way Dallas, TX 75206	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler Simmons Contributor address; City; State; Zip Code 2500 McKinney Avenue Suite 734 Dallas, TX 75204	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin Breunig Contributor address; City; State; Zip Code 9900 N Central Expressway Suite 570 Dallas, TX 75238	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
33 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

11/19/2024

Officeholder
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Benjamin Breunig

7 Amount of contribution (\$)

1500.00

6 Contributor address;

City;

State;

Zip Code

9900 N Central Expressway Suite 570 Dallas, TX 75238

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/19/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Charles Adams

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

4213 Caruth Blvd

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/19/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jacobe Chandler

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

4718 Firewheel Drive

Garland, TX 75044

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/20/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brenda Garza

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

223 E 6th Street

Dallas, TX 75203

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 34 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 11/20/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Thornton 6 Contributor address; City; State; Zip Code 431 E 6th Street Dallas, TX 75203	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/20/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Kepner Contributor address; City; State; Zip Code 940 Emmett Ave Suite 200 Belmont, CA 94002	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/21/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schafer Smartt Contributor address; City; State; Zip Code 5426 Martel Ave Dallas, TX 75206	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/21/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tony Page Contributor address; City; State; Zip Code 3210 Carlisle Street Suite 1 Dallas, TX 75204	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: 35 of 66
2 FILER NAME Chad West			3 Filer ID (Ethics Commission Filers)
4 Date 11/22/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sue Alvarez 6 Contributor address; City; State; Zip Code 1327 Walter Street Dallas, TX 75211		7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date 11/24/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jude Akpunku Contributor address; City; State; Zip Code 512 Avenue L Dallas, TX 75203		Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/25/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy Felts Contributor address; City; State; Zip Code 3997 FM 3211 Caddo Mills, TX 75135		Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/25/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven Camp Contributor address; City; State; Zip Code 611 Kessler Springs Avenue Dallas, TX 75208		Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 36 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 11/26/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnie Taylor 6 Contributor address; City; State; Zip Code 1403 Hollywood Avenue Dallas, TX 75208	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/26/2024 Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce Reid Contributor address; City; State; Zip Code 71 S Wacker Drive Chicago, IL 60606	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/26/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee Cobb Contributor address; City; State; Zip Code 1717 Arts Plaza Suite 2311 Dallas, TX 75201	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/26/2024 Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leland Burk Contributor address; City; State; Zip Code 8215 Westchester Drive Suite 207 Dallas, TX 75225	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filers)

Chad West

Campaign Contribution

6 Contributor address; City; State; Zip Code
6108 Teresa Lane Rowlett, TX 75089

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Campaign Contribution

Contributor address; City; State; Zip Code
1601 Elm Street Suite 3110 Dallas, TX 75201

Amount of contribution (\$)	
1000.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Campaign Contribution

Contributor address; City; State; Zip Code
1600 Arbor Ridge Drive Fort Worth, TX 76112

Amount of contribution (\$) 25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Campaign Contribution

Contributor address; City; State; Zip Code
821 Haines Avenue Dallas, TX 75208

Amount of contribution (\$)	
100.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
38 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

12/03/2024

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bob Meckfessel

7 Amount of contribution (\$)

100.00

6 Contributor address;

1427 Haines Avenue

City;

Dallas, TX 75208

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/03/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Mullally

Amount of contribution (\$)

250.00

Contributor address;

922 N Edgefield Avenue

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/03/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gay Revi

Amount of contribution (\$)

100.00

Contributor address;

908 N Bishop Avenue Suite 102

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/03/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mike Rawlings

Amount of contribution (\$)

1000.00

Contributor address;

3879 Maple Avenue Suite 400

City;

Dallas, TX 75219

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 39 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/04/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Heinbaugh 6 Contributor address; City; State; Zip Code 1801 Annex Ave Suite 507 Dallas, TX 75204	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/04/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Spence Contributor address; City; State; Zip Code 408 W 8th Street Suite 103 Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2024 Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Spence Contributor address; City; State; Zip Code 408 W 8th Street Suite 103 Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veletta Forsythe Lill Contributor address; City; State; Zip Code 622 Blair Blvd Dallas, TX 75223	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 40 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/06/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady Wood 6 Contributor address; City; State; Zip Code 5121 Southbrook Drive Dallas, TX 75209	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/06/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason Moser Contributor address; City; State; Zip Code 600 Rainbow Drive Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Megan Wood Contributor address; City; State; Zip Code 5121 Southbrook Drive Dallas, TX 75209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/09/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anne Hagan Contributor address; City; State; Zip Code 204 S Willomet Avenue Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 41 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/09/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katherine Homan 6 Contributor address; City; State; Zip Code 1629 Handley Drive Dallas, TX 75208	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/09/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Wolf Contributor address; City; State; Zip Code 3918 Fairfax Avenue Dallas, TX 75209	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy Schaffner Contributor address; City; State; Zip Code 1622 Oak Knoll Street Dallas, TX 75208	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becky Connatser Contributor address; City; State; Zip Code 815 W Greenbriar Lane Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 42 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/10/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnie Taylor 6 Contributor address; City; State; Zip Code 1403 Hollywood Avenue Dallas, TX 75208	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/10/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Britton Williams Contributor address; City; State; Zip Code 832 Blaylock Drive Suite 3 Dallas, TX 75203	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks Johnson Contributor address; City; State; Zip Code 929 N Windomere Avenue Dallas, TX 75208	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cindy Hawkins Contributor address; City; State; Zip Code 2126 Kessler Court Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
43 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

12/10/2024

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Clinton Haley

6 Contributor address;

6311 Club Lake Drive

City;

Dallas, TX 75214

State; Zip Code

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/10/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Cynthia Michaels

Contributor address;

519 Woolsey Drive

City;

Dallas, TX 75224

State; Zip Code

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/10/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Preziosi

Contributor address;

2229 Lawndale Drive

City;

Dallas, TX 75211

State; Zip Code

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/10/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lisa Taylor

Contributor address;

923 Salmon Drive

City;

Dallas, TX 75208

State; Zip Code

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 44 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/10/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger Wedell 6 Contributor address; City; State; Zip Code 1318 Elmwood Blvd Dallas, TX 75224	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/10/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russ Aikman Contributor address; City; State; Zip Code 225 S Windomere Ave Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suzanne Buss Contributor address; City; State; Zip Code 653 Culpepper Place Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom Tibbitts Contributor address; City; State; Zip Code 8580 County Road 167 McKinney, TX 75071	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

Forms provided by Texas Ethics Commission www.ethics.state.tx.us Revised 8/17/2020

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 46 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/13/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Garner 6 Contributor address; City; State; Zip Code P.O. Box 180188 Dallas, TX 75218	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/13/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doug Taylor Contributor address; City; State; Zip Code 1147 N Winnetka Avenue Dallas, TX 75208	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heather Walker Contributor address; City; State; Zip Code 1010 N Winnetka Avenue Dallas, TX 75208	Amount of contribution (\$) 300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/16/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susan Reese Contributor address; City; State; Zip Code 8625 Douglas Avenue Dallas, TX 75225	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 47 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/16/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler Kurtz 6 Contributor address; City; State; Zip Code 526 S Winnetka Avenue Dallas, TX 75208	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/17/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Green Contributor address; City; State; Zip Code 4411 Vandelia Street Dallas, TX 75219	Amount of contribution (\$) 400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/17/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barb Nunn Contributor address; City; State; Zip Code 504 N Manus Drive Dallas, TX 75224	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/17/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Deggs Contributor address; City; State; Zip Code 4241 Rawlins Street Suite 14 Dallas, TX 75219	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 48 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/17/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Nichols 6 Contributor address; City; State; Zip Code 5877 Bayside Drive Fort Worth, TX 76132	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/17/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gary Bellomy Contributor address; City; State; Zip Code 4425 Swiss Avenue Dallas, TX 75204	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Assieh Khajehnoori Contributor address; City; State; Zip Code 812 N Bishop Avenue Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keith Pomykal Contributor address; City; State; Zip Code 3001 Sale Street Suite 409 Dallas, TX 75219	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<div>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</div> <div>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</div>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
49 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

12/18/2024

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Payma

6 Contributor address;

812 N Bishop Avenue

City;

Dallas, TX 75208

State; Zip Code

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/18/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Paul Wingo

Contributor address;

1227 Woodlawn Avenue

City;

Dallas, TX 75208

State; Zip Code

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/18/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Paula Larsen

Contributor address;

665 Kessler Reserve Court

City;

Dallas, TX 75208

State; Zip Code

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/18/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Scott Larsen

Contributor address;

665 Kessler Reserve Court

City;

Dallas, TX 75208

State; Zip Code

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 50 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/19/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beverly Mendoza 6 Contributor address; City; State; Zip Code 520 E 5th Street Dallas, TX 75203	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/19/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carol Hagler Contributor address; City; State; Zip Code 417 N Montclair Avenue Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack Hagler Contributor address; City; State; Zip Code 417 N Montclair Avenue Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tino Jalomo Contributor address; City; State; Zip Code 607 W Canty Street Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 51 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/19/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vipin Nambiar 6 Contributor address; City; State; Zip Code 5534 W Hanover Avenue Dallas, TX 75209	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/19/2024 Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vipin Nambiar Contributor address; City; State; Zip Code 5534 W Hanover Avenue Dallas, TX 75209	Amount of contribution (\$) 1500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony Cuevas Contributor address; City; State; Zip Code 1619 Sylvan Avenue Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Schenkel Contributor address; City; State; Zip Code 3317 Purdue Avenue Dallas, TX 75225	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 52 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/20/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carl Scherrieb 6 Contributor address; City; State; Zip Code 5877 Bayside Drive Fort Worth, TX 76132	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/20/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Luna Contributor address; City; State; Zip Code 4033 Prescott Avenue Dallas, TX 75210	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kent Mecklenburg Contributor address; City; State; Zip Code 4033 Prescott Avenue Dallas, TX 75210	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leo Cusimano Contributor address; City; State; Zip Code 1619 Sylvan Avenue Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
53 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

12/20/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lupe Valdez

7 Amount of contribution (\$)

150.00

Campaign
Contribution

6 Contributor address;

707 N Edgefield Avenue

City;

Dallas, TX 75208

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/20/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Stephen Hoyl

Amount of contribution (\$)

250.00

Campaign
Contribution

Contributor address;

2900 McKinnon Suite 603

City;

Dallas, TX 75201

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/20/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Swede Hanson

Amount of contribution (\$)

500.00

Campaign
Contribution

Contributor address;

9925 Lakedale Drive

City;

Dallas, TX 75218

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/20/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Vitaly Lunev

Amount of contribution (\$)

100.00

Campaign
Contribution

Contributor address;

623 Haines Avenue

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
54 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

12/25/2024

Officeholder
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Barry Hancock

7 Amount of contribution (\$)

1000.00

6 Contributor address;

4514 Travis Street Suite 326

City;

Dallas, TX 75205

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/27/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chuck Norcross

Amount of contribution (\$)

100.00

Contributor address;

506 Woolsey Drive

City;

Dallas, TX 75224

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/27/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Heather Butterfield

Amount of contribution (\$)

100.00

Contributor address;

3254 Purdue Avenue

City;

Los Angeles, CA 90066

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/27/2024

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kathy Hewitt

Amount of contribution (\$)

50.00

Contributor address;

1410 Yakimo Drive

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 55 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/27/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laurence Vineyard 6 Contributor address; City; State; Zip Code 11436 Strait Lane Dallas, TX 75229	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/27/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roland Leal Contributor address; City; State; Zip Code 414 North Casa Grande Circle Duncanville, TX 75116	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/27/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Temple Anderson Contributor address; City; State; Zip Code 1921 Mayflower Drive Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alice Zaccarelli Contributor address; City; State; Zip Code 2243 Lawndale Drive Dallas, TX 75211	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
56 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

12/30/2024

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Becky Moffett

6 Contributor address;

934 Stevens Woods Court

City;

Dallas, TX 75208

State; Zip Code

7 Amount of contribution (\$)

400.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/30/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lauren Moffett

Contributor address;

934 Stevens Woods Court

City;

Dallas, TX 75208

State; Zip Code

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/30/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tom Kapioltas

Contributor address;

5304 Middleton Drive

City;

Parker, TX 75002

State; Zip Code

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ben Coffee

Contributor address;

2752 Gaston Avenue Suite 1232

City;

Dallas, TX 75226

State; Zip Code

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A1

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

Forms provided by Texas Ethics Commission www.ethics.state.tx.us Revised 8/17/2020

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 58 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Brooks 6 Contributor address; City; State; Zip Code 735 Rainbow Drive Dallas, TX 75208	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chad Dolezal Contributor address; City; State; Zip Code 101 S Winnetka Avenue Dallas, TX 75208	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Culak Contributor address; City; State; Zip Code 1223 Kings Highway Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Claudia Huerta Contributor address; City; State; Zip Code 2125 Elmwood Blvd Dallas, TX 75224	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 59 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David de la Fuente 6 Contributor address; City; State; Zip Code 106 S Clinton Dallas, TX 75208	7 Amount of contribution (\$) 10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diana Lin Contributor address; City; State; Zip Code 4323 Highlander Dr Dallas, TX 75287	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enrique MacGregor Contributor address; City; State; Zip Code 845 N Oak Cliff Blvd Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fred Pena Contributor address; City; State; Zip Code 410 E 5th Street Dallas, TX 75203	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 60 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hailee Joy 6 Contributor address; City; State; Zip Code 701 Melba Street Dallas, TX 75208	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrod Jackson Contributor address; City; State; Zip Code 5301 Montrose Dallas, TX 75209	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Jennings Contributor address; City; State; Zip Code 1823 Naylor Street Dallas, TX 75228	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joy Dolezal Contributor address; City; State; Zip Code 101 S Winnetka Avenue Dallas, TX 75208	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 61 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JR Huerta 6 Contributor address; City; State; Zip Code 2125 Elmwood Blvd Dallas, TX 75224	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juan Parra Contributor address; City; State; Zip Code 15 Stonebriar Court Dallas, TX 75206	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyle Wick Contributor address; City; State; Zip Code 1212 N Oak Cliff Blvd Dallas, TX 75208	Amount of contribution (\$) 300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Niermann Contributor address; City; State; Zip Code 845 N Oak Cliff Blvd Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
62 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

12/31/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mary Cook

7 Amount of contribution (\$)

100.00

Campaign
Contribution

6 Contributor address;

1942 Malone Cliff View

City;

Dallas, TX 75208

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/31/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mary Kay de la Fuente

Amount of contribution (\$)

25.00

Campaign
Contribution

Contributor address;

106 S Clinton

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Melissa Kingston

Amount of contribution (\$)

1000.00

Campaign
Contribution

Contributor address;

5901 Palo Pinto

City;

Dallas, TX 75206

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2024

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michelle Brooks

Amount of contribution (\$)

50.00

Campaign
Contribution

Contributor address;

735 Rainbow Drive

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 63 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2024 Campaign Contribution	5 Full name of contributor Nick Noorani 6 Contributor address; City; State; Zip Code 3009 Hallwell Dr Dallas, TX 75093 <input type="checkbox"/> out-of-state PAC (ID#:_____)	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor Paul Sims Contributor address; City; State; Zip Code 8811 Antrim Dr. Dallas, TX 75218 <input type="checkbox"/> out-of-state PAC (ID#:_____)	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor Peter Jacobsen Contributor address; City; State; Zip Code 419 W 9th Street Suite 104 Dallas, TX 75208 <input type="checkbox"/> out-of-state PAC (ID#:_____)	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor Philip Kingston Contributor address; City; State; Zip Code 5901 Palo Pinto Dallas, TX 75206 <input type="checkbox"/> out-of-state PAC (ID#:_____)	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 64 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephanie Wick 6 Contributor address; City; State; Zip Code 1212 N Oak Cliff Blvd Dallas, TX 75208	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taryl Sherman Contributor address; City; State; Zip Code 1743 Elmwood Blvd Dallas, TX 75224	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor de la Fuente Contributor address; City; State; Zip Code 106 S Clinton Dallas, TX 75208	Amount of contribution (\$) 10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vinnie Sherman Contributor address; City; State; Zip Code 1743 Elmwood Blvd Dallas, TX 75224	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
65 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

12/31/2024

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Waylon Longino

7 Amount of contribution (\$)

500.00

6 Contributor address;

4619 Insurance Lane

City;

Dallas, TX 75205

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/31/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Joy

Amount of contribution (\$)

50.00

Contributor address;

701 Melba Street

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Zimmerman

Amount of contribution (\$)

25.00

Contributor address;

105 S Willomet Avenue

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2024

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Yasmine Payma

Amount of contribution (\$)

50.00

Contributor address;

812 N Bishop Avenue

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 66 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 08/07/2024 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREpac Texas Realtors PAC <hr/> 6 Contributor address; City; State; Zip Code P.O. Box 2246 Austin, TX 78768	7 Amount of contribution (\$) 2500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/15/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HBA of Greater Dallas HOMEPAC <hr/> Contributor address; City; State; Zip Code 5816 W Plano Parkway Dallas, TX 75093	Amount of contribution (\$) 2500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/23/2024 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apartment Assoc of Greater Dallas <hr/> Contributor address; City; State; Zip Code 2100 West Walnut Hill Lane Suite 1000 Irving, TX 75038	Amount of contribution (\$) 2500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 07/15/2024	5 Payee name The UPS Store 78	
6 Amount (\$) 51.02 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 1222 North Bishop Avenue Suite 200 Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing costs	(b) Description Printing costs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/24/2024	Payee name JW Mariott	
Amount (\$) 126.14 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 110 East 2nd Street Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel out of district	Description Travel out of district
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/24/2024	Payee name Austin Barton Spring	
Amount (\$) 70.39 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1500 Barton Springs Road Austin, TX 78704	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meal with Affordable Housing advocates	Description Meals
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 07/24/2024	5 Payee name Vespaio	
6 Amount (\$) 128.26 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1610 South Congress Avenue Austin, TX 78704 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Meal with Affordable Housing advocates	(b) Description Meals
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/25/2024	Payee name MAILCHIMP	
Amount (\$) 171.63 Campaign Funds for Campaign Expenditures	Payee address; 405 N Angier Ave NE Atlanta, GA 30308 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description E newsletter
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/26/2024	Payee name Austin Airport	
Amount (\$) 15.02 Officeholder Funds for Officeholder Expenditures	Payee address; 3600 Presidential Boulevard Austin, TX 78719 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel out of district	Description Travel out of district
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 07/29/2024	5 Payee name Tribal All Day Café	
6 Amount (\$) 73.68 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 263 North Bishop AvenueDallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Meals	(b) Description Meal with Commissioner
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/29/2024	Payee name Cheesecake Factory	
Amount (\$) 127.72 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 7700 West Northwest Highway Dallas , TX 75225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising	Description Meal with Board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/01/2024	Payee name Chad West	
Amount (\$) 181.50 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 810 North Bishop Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Mileage Reimbursement	Description Travel in District
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political 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: 4 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 08/05/2024	5 Payee name Walgreens	
6 Amount (\$) 69.13 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 1306 North Beckley Avenue Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing costs	(b) Description Printing costs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 10/02/2024	Payee name Amazon	
Amount (\$) 265.24 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 325 9th Avenue North Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Supplies	Description Office Supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 08/05/2024	Payee name Extra Space	
Amount (\$) 98.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 1931 Fort Worth Avenue Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Storage	Description Storage Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 08/07/2024	5 Payee name Wayward Coffee	
6 Amount (\$) 34.90 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1318 West Davis Street Dallas, TX 75208 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Meals	(b) Description Coffee with new residents
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/07/2024	Payee name Cox Farms Market	
Amount (\$) 57.76 Officeholder Funds for Officeholder Expenditures	Payee address; 778 Fort Worth Avenue Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meals	Description Supplies for meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/09/2024	Payee name Cretias Bakery	
Amount (\$) 86.00 Officeholder Funds for Officeholder Expenditures	Payee address; 228 West Davis Street Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description Gifts for Supporters
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 08/12/2024	5 Payee name Taco Deli	
6 Amount (\$) 35.28 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1878 Sylvan Avenue Dallas, TX 75208 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Volunteer Expense	(b) Description Food for volunteers
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/12/2024	Payee name Tribal All Day Café	
Amount (\$) 49.18 Officeholder Funds for Officeholder Expenditures	Payee address; 263 North Bishop AvenueDallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal with neighborhood advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/13/2024	Payee name Tribal All Day Café	
Amount (\$) 33.29 Officeholder Funds for Officeholder Expenditures	Payee address; 263 North Bishop AvenueDallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal with community member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 08/13/2024		5 Payee name Paradiso			
6 Amount (\$) 100.00 Officeholder Funds for Officeholder Expenditures		7 Payee address; City; State; Zip Code 308 North Bishop AvenueDallas, TX 75208			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Gift card for community event		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 08/14/2024		Payee name Veracruz Café			
Amount (\$) 100.00 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 408 North Bishop Avenue Suite 107 Dallas, TX 75208			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		Description Donation for neighborhood event		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 08/19/2024		Payee name Toulouse Knox			
Amount (\$) 60.56 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 3314 Knox Street Dallas, TX 75205			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising		Description Meal with Donor		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 08/20/2024	5 Payee name Uchiba Dallas	
6 Amount (\$) 93.94 Officeholder Funds for Officeholder Expenditures	7 Payee address; 2817 Maple Avenue Dallas, TX 75201 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Meals	(b) Description Meal with Commissioner
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/20/2024	Payee name La Condesa	
Amount (\$) 250.56 Officeholder Funds for Officeholder Expenditures	Payee address; 400 West Second Street Austin, TX 78701 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel out of district	Description Meal with City Staff
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/20/2024	Payee name Chad West	
Amount (\$) 1404.00 Officeholder Funds for Officeholder Expenditures	Payee address; 810 North Bishop Avenue Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out Of District	Description Hotel cost
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 08/20/2024	5 Payee name Chad West	
6 Amount (\$) 402.32 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 810 North Bishop AvenueDallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out Of District	(b) Description Travel Reimbursement - flight
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/21/2024	Payee name Chad West	
Amount (\$) 186.88 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 810 North Bishop AvenueDallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out Of District	Description Travel Reimbursement meals
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/22/2024	Payee name Susana Jaimes	
Amount (\$) 325.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor for holiday cards and gifts	Description Contract Labor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 10 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 08/23/2024		5 Payee name The Kessler School			
6 Amount (\$) 2000.00 Officeholder Funds for Officeholder Expenditures		7 Payee address; 1822 W 10th Street Dallas, TX 75208 City; State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation		(b) Description Donation		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 08/26/2024		Payee name Hunkys			
Amount (\$) 100.00 Campaign Funds for Campaign Expenditures		Payee address; 3930 Cedar Springs RoadDallas, TX 75219 City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts		Description Gift for Donor		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 08/26/2024		Payee name MAILCHIMP			
Amount (\$) 171.63 Campaign Funds for Campaign Expenditures		Payee address; 405 N Angier Ave NE Atlanta, GA 30308 City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description E newsletter		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 08/27/2024		5 Payee name Chips Hamburgers			
6 Amount (\$) 58.96 Officeholder Funds for Officeholder Expenditures		7 Payee address; 4530 West Lovers Lane Dallas, TX 75225 City; State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Meals		(b) Description Meal with Board Member		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 08/29/2024		Payee name R+D Dallas			
Amount (\$) 87.73 Officeholder Funds for Officeholder Expenditures		Payee address; 8300 Preston Center Plaza Dallas, TX 75205 City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Meeting with home builder		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 08/30/2024		Payee name Stevens Park Golf Course			
Amount (\$) 50.89 Officeholder Funds for Officeholder Expenditures		Payee address; 1005 North Montclair Avenue Dallas, TX 75208 City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel in district		Description Community Meeting		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 08/30/2024		5 Payee name Parking Management			
6 Amount (\$) 20.00 Officeholder Funds for Officeholder Expenditures		7 Payee address; 1005 North Montclair Avenue Dallas, TX 75208 City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Travel out of district		(b) Description Non Profit Meeting	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 08/30/2024		Payee name Dr Delphinium			
Amount (\$) 173.77 Officeholder Funds for Officeholder Expenditures		Payee address; 5806 West Lovers Lane Dallas, TX 75225 City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Gifts		Description Flowers for supporter	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 08/30/2024		Payee name Beverleys			
Amount (\$) 132.59 Officeholder Funds for Officeholder Expenditures		Payee address; 3215 North Fitzhugh Avenue Dallas, TX 75204 City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Meal with Board	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 13 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/03/2024	5 Payee name Elmwood Coffee	
6 Amount (\$) 5.25 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1805 South Edgefield Avenue Dallas, TX 75208 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Meals	(b) Description Meals
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Stevens Park Golf Course	
Amount (\$) 8.71 Officeholder Funds for Officeholder Expenditures	Payee address; 1005 North Montclair Avenue Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel in district	Description Community Meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Lucky Dog Saloon	
Amount (\$) 14.07 Officeholder Funds for Officeholder Expenditures	Payee address; 2701 Cedar Springs RoadDallas, TX 75201 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Volunteer Expense	Description Meal with volunteer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 14 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/03/2024	5 Payee name Katy Trail Ice House	
6 Amount (\$) 41.01 Officeholder Funds for Officeholder Expenditures	7 Payee address; 3127 Routh Street Dallas, TX 75201 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Volunteer Expense	(b) Description Meal with volunteer
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Extra Space Storage	
Amount (\$) 98.00 Campaign Funds for Campaign Expenditures	Payee address; 1931 Fort Worth AvenueDallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Storage	Description Storage Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/03/2024	Payee name R+D Dallas	
Amount (\$) 101.98 Officeholder Funds for Officeholder Expenditures	Payee address; 8300 Preston Center Plaza Dallas, TX 75225 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meals	Description Meal with former CM
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 15 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/03/2024	5 Payee name Hudson House Lake	
6 Amount (\$) 114.72 Officeholder Funds for Officeholder Expenditures	7 Payee address; 4040 Abrams Road Dallas, TX 75214 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meeting with association leadership
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Maison Chinoise	
Amount (\$) 171.98 Officeholder Funds for Officeholder Expenditures	Payee address; 4152 Cole Avenue Suite 106 Dallas, TX 75204 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meeting with eco dev advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/03/2024	Payee name American Airlines	
Amount (\$) 710.03 Officeholder Funds for Officeholder Expenditures	Payee address; 3200 E Airfield Drive DFW Airport, TX 75261 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out Of District	Description Travel for conference
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 16 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 09/04/2024		5 Payee name Honor Bar			
6 Amount (\$) 47.33 Officeholder Funds for Officeholder Expenditures		7 Payee address; City; State; Zip Code 26 Highland Park VillageDallas, TX 75205			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meeting with TIF Board representative		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 09/05/2024		Payee name R+D Dallas			
Amount (\$) 198.71 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 8300 Preston Center PlazaDallas, TX 75225			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Dinner with former elected official		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 09/05/2024		Payee name Written By The Seasons			
Amount (\$) 271.30 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 380 Melba Street Dallas, TX 75208			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Dinner with community advocates		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 17 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/09/2024	5 Payee name Cretias Bakery	
6 Amount (\$) 13.20 Campaign Funds for Campaign Expenditures	7 Payee address; 228 West Davis Street Dallas, TX 75208 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift	(b) Description Gift for volunteer
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/09/2024	Payee name Birdies East	
Amount (\$) 117.36 Officeholder Funds for Officeholder Expenditures	Payee address; 6221 East Mockingbird Lane Dallas, TX 75214 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meals	Description Meal with board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/10/2024	Payee name Waterman - Central DFW	
Amount (\$) 1135.50 Officeholder Funds for Officeholder Expenditures	Payee address; 3606 S Tyler Street Dallas, TX 75225 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Expense	Description Computer equipmt and install
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/10/2024	5 Payee name Cretias Bakery	
6 Amount (\$) 24.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; 228 West Davis Street Dallas, TX 75208 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts	(b) Description Gifts for councilmembers
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/10/2024	Payee name Ascension Coffee	
Amount (\$) 26.51 Officeholder Funds for Officeholder Expenditures	Payee address; 200 Crescent Court Suite 40 Dallas, TX 75201 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meals	Description Meeting with housing advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/10/2024	Payee name Katy Trail Ice House	
Amount (\$) 31.95 Officeholder Funds for Officeholder Expenditures	Payee address; 3127 Routh Street Dallas, TX 75201 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meals	Description Meeting with board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 19 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/11/2024	5 Payee name Rally House	
6 Amount (\$) 153.68 Officeholder Funds for Officeholder Expenditures	7 Payee address; 5500 Greenville Avenue Suite 203 Dallas, TX 75206 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description Gift for community volunteer
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/13/2024	Payee name Greater Dallas Chamber	
Amount (\$) 300.00 Officeholder Funds for Officeholder Expenditures	Payee address; 909 Lake Carolyn Parkway Suite 320 Irving, TX 74111 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/16/2024	Payee name The Pour House	
Amount (\$) 24.68 Campaign Funds for Campaign Expenditures	Payee address; 1919 Skillman Street Dallas, TX 75206 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meeting	Description Meeting with volunteers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 20 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/16/2024	5 Payee name Shinsei Restaurant	
6 Amount (\$) 130.45 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 7713 Inwood Road Dallas, TX 75209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meeting with housing advocate
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/17/2024	Payee name Tepa Bar & Grill	
Amount (\$) 63.31 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 428 South Hampton Road Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meeting Expense	Description Community Meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/18/2024	Payee name The UPS Store 78	
Amount (\$) 125.01 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1222 North Bishop Avenue Suite 200 Dallas , TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing costs	Description Printing costs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 21 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/18/2024	5 Payee name Mirador	
6 Amount (\$) 85.45 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 1608 Elm Street Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Meeting	(b) Description Meeting with supporters
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/18/2024	Payee name Teleflora	
Amount (\$) 108.22 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 11444 West Olympic Boulevard Los Angeles, CA 90064	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description Flowers for staff mbr family funeral
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/18/2024	Payee name National Anthem	
Amount (\$) 164.16 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 2130 Commerce Street Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meals	Description Dinner with staff
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political 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 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/19/2024	5 Payee name The Salty Donut	
6 Amount (\$) 65.08 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 414 West Davis Street Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts	(b) Description Gifts for councilmembers
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/20/2024	Payee name NTX The Kessler	
Amount (\$) 115.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1230 West Davis Street Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/23/2024	Payee name Hunkys	
Amount (\$) 41.64 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 3930 Cedar Springs RoadDallas, TX 75219	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meals with BADMA member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 23 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/23/2024	5 Payee name Cretias Bakery	
6 Amount (\$) 39.20 Officeholder Funds for Officeholder Expenditures	7 Payee address; 228 West Davis Street Dallas, TX 75208 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Volunteer Expense	(b) Description Gifts for community volunteers
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/23/2024	Payee name The Dallas Assembly	
Amount (\$) 2560.00 Officeholder Funds for Officeholder Expenditures	Payee address; 12900 Preston Road Suite 1210 Dallas, TX 75230 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel out of district	Description Travel Out of District
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/25/2024	Payee name Taco y Vino	
Amount (\$) 66.76 Officeholder Funds for Officeholder Expenditures	Payee address; 213 West Eighth Street Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meeting	Description Meeting with board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 24 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/25/2024	5 Payee name MAILCHIMP	
6 Amount (\$) 171.63 Campaign Funds for Campaign Expenditures	7 Payee address; 405 N Angier Ave NE Atlanta, GA 30308 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description E newsletter
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/27/2024	Payee name Bullzerk	
Amount (\$) 33.56 Officeholder Funds for Officeholder Expenditures	Payee address; 332 West Davis Street Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description Gift for retiring neighborhood leader
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/27/2024	Payee name Apple Store	
Amount (\$) 433.99 Officeholder Funds for Officeholder Expenditures	Payee address; 100 Knox Street Dallas, TX 75214 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Supplies	Description Officeholder phone accessories
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 25 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/27/2024	5 Payee name Bishop Street Market	
6 Amount (\$) 45.47 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 401 N Bishop Avenue Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts	(b) Description Gift for city employee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/27/2024	Payee name Adamson High Band	
Amount (\$) 255.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 309 East Ninth Street Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/27/2024	Payee name The Adolphus	
Amount (\$) 353.18 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1321 Commerce Street Dallas, TX 75202	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meals	Description Council meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 26 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/28/2024	5 Payee name Elena Guzman	
6 Amount (\$) 260.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; 306 S Montreal Avenue Dallas, TX 75208 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor storage	(b) Description Contract Labor
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/01/2024	Payee name Go Daddy	
Amount (\$) 74.32 Campaign Funds for Campaign Expenditures	Payee address; 813 N 1st Avenue Tempe, AZ 40021 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Domain
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/01/2024	Payee name Well Community	
Amount (\$) 500.00 Officeholder Funds for Officeholder Expenditures	Payee address; 125 Sunset Avenue Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 27 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/02/2024	5 Payee name Tribal All Day Café	
6 Amount (\$) 65.39 Officeholder Funds for Officeholder Expenditures	7 Payee address; 263 North Bishop Avenue City; Dallas, TX 75208 State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Meeting	(b) Description Meeting with commissioner
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/02/2024	Payee name Amazon	
Amount (\$) 224.10 Officeholder Funds for Officeholder Expenditures	Payee address; 325 9th Avenue North City; Seattle, WA 98109 State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Supplies	Description Home Office Supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/03/2024	Payee name Ace Parking	
Amount (\$) 20.00 Officeholder Funds for Officeholder Expenditures	Payee address; 200 Crescent Court City; Dallas, TX 75201 State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Parking	Description Parking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 28 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 10/03/2024		5 Payee name Ascension			
6 Amount (\$) 22.44 Officeholder Funds for Officeholder Expenditures		7 Payee address; 1621 Oak Lawn Avenue Dallas, TX 75207 City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Meeting Expense		(b) Description Breakfast with housing advocate	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/03/2024		Payee name Extra Space			
Amount (\$) 98.00 Campaign Funds for Campaign Expenditures		Payee address; 1931 Fort Worth Avenue Dallas, TX 75208 City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Storage		Description Storage Fees	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/03/2024		Payee name Beverleys			
Amount (\$) 180.46 Officeholder Funds for Officeholder Expenditures		Payee address; 3215 North Fitzhugh Avenue Dallas, TX 75204 City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Meeting with restaurant assoc leader	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 29 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/04/2024	5 Payee name The UPS Store 78	
6 Amount (\$) 60.08 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 1222 North Bishop Avenue Suite 200 Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing costs	(b) Description Printing costs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/04/2024	Payee name BBBop Seoul	
Amount (\$) 81.83 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 828 West Davis Street Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meals	Description Lunch with Non-Profit Board Members
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/04/2024	Payee name Gonzalez Restaurant	
Amount (\$) 154.27 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 416 West Jefferson Boulevard Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meeting Expense	Description Dinner with neighborhood leaders
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 30 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/04/2024	5 Payee name Primal Fundraising	
6 Amount (\$) 3416.52 Campaign Funds for Campaign Expenditures	7 Payee address; 5706 East Mockingbird Lane Dallas, TX 75206 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Costs	(b) Description Consulting Costs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/07/2024	Payee name State Fair	
Amount (\$) 50.00 Officeholder Funds for Officeholder Expenditures	Payee address; 925 South Haskell Avenue Dallas, TX 75223 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description State Fair Gift for volunteer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/07/2024	Payee name Bistro 31	
Amount (\$) 54.16 Officeholder Funds for Officeholder Expenditures	Payee address; 87 Highland Park Village Suite 200 Dallas, TX 75205 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Lunch with home builder
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 31 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 10/07/2024		5 Payee name Honor Bar			
6 Amount (\$) 75.51 Officeholder Funds for Officeholder Expenditures		7 Payee address; City; State; Zip Code 26 Highland Park VillageDallas, TX 75205			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Dinner with Richardson CM		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/08/2024		Payee name Ascension			
Amount (\$) 27.16 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 200 Crescent Court Suite 40 Dallas, TX 75201			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meeting		Description Breakfast meeting with potential council candidate		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/08/2024		Payee name Maggianos North Park			
Amount (\$) 291.87 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 205 NorthPark Center Dallas, TX 75225			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Dinner with neighborhood leaders		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 32 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 10/08/2024		5 Payee name The 23rd Senatorial District Tejano			
6 Amount (\$) 60.00 Officeholder Funds for Officeholder Expenditures		7 Payee address; City; State; Zip Code 10432 High Hollow Drive Suite 141 Dallas, TX 75230			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Dues		(b) Description Member Dues	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/08/2024		Payee name North Oak Cliff Greenspace			
Amount (\$) 1250.00 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 1005 North Montclair Avenue Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Donation		Description Sponsorship	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/09/2024		Payee name Walgreens			
Amount (\$) 22.40 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 1306 North Beckley Avenue Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Supplies		Description Office Supplies	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 33 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 10/10/2024		5 Payee name The USPS			
6 Amount (\$) 47.18 Officeholder Funds for Officeholder Expenditures		7 Payee address; City; State; Zip Code 515 Centre Street Dallas, TX 75208			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing costs		(b) Description Printing costs		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/11/2024		Payee name Wayward Coffee			
Amount (\$) 15.00 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 1318 West Davis Street Dallas, TX 75208			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meeting		Description Coffee meeting with advisor		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/15/2024		Payee name Ascension			
Amount (\$) 22.09 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 200 Crescent Court Suite 40 Dallas, TX 75201			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meeting		Description Breakfast meeting with arts advocate		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 34 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/15/2024	5 Payee name Walgreens	
6 Amount (\$) 54.11 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 1306 North Beckley Avenue Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office supplies	(b) Description Office decorations
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Ace Parking	
Amount (\$) 25.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 200 Crescent Court Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Parking	Description Parking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Dallas Fair	
Amount (\$) 38.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1300 Robert B Cullum Boulevard Dallas, TX 75210	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meals	Description Lunch with Donors
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 35 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 10/15/2024		5 Payee name Tribal All Day Café			
6 Amount (\$) 40.72 Officeholder Funds for Officeholder Expenditures		7 Payee address; City; State; Zip Code 263 North Bishop AvenueDallas, TX 75208			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Meeting		(b) Description Breakfast meeting with envt advocate		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/15/2024		Payee name Stevens Park Golf Course			
Amount (\$) 183.92 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 1005 North Montclair Avenue Dallas, TX 75208			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Meeting with golf course advocates		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/15/2024		Payee name American Airlines			
Amount (\$) 208.95 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 3200 E Airfield Drive DFW Airport, TX 75261			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel out of district		Description Travel expense flight changes		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 36 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/16/2024	5 Payee name DFW Airport Park	
6 Amount (\$) 52.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 3200 E Airfield Drive Dallas, TX 65261	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Parking	(b) Description Parking
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/16/2024	Payee name Stevens Park Golf Course	
Amount (\$) 90.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1005 North Montclair Avenue Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meeting with Rosemont Dads group
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/16/2024	Payee name Tribal All Day Café	
Amount (\$) 48.74 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 263 North Bishop AvenueDallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meeting Expense	Description Breakfast meeting with skate park donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 37 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/16/2024	5 Payee name Las Palmas	
6 Amount (\$) 160.65 Officeholder Funds for Officeholder Expenditures	7 Payee address; 2708 Routh Street Dallas, TX 75201 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Meals	(b) Description Dinner with former Councilmember
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/17/2024	Payee name Ascension	
Amount (\$) 44.50 Officeholder Funds for Officeholder Expenditures	Payee address; 1621 Oak Lawn Avenue Dallas, TX 75201 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meeting	Description Meeting with arts advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/22/2024	Payee name Fort Worth Avenue Development	
Amount (\$) 250.00 Officeholder Funds for Officeholder Expenditures	Payee address; P.O. Box 225120 Fort Worth , TX 75222 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 38 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/24/2024	5 Payee name Lucky Dog Saloon	
6 Amount (\$) 1464.07 Campaign Funds for Campaign Expenditures	7 Payee address; 2701 Cedar Springs Road City; State; Zip Code Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fundraising	(b) Description Fundraising event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/24/2024	Payee name MAILCHIMP	
Amount (\$) 171.63 Campaign Funds for Campaign Expenditures	Payee address; 405 N Angier Ave NE City; State; Zip Code Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description E newsletter
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/24/2024	Payee name Primal Fundraising	
Amount (\$) 4135.00 Campaign Funds for Campaign Expenditures	Payee address; 5706 East Mockingbird Lane City; State; Zip Code Dallas, TX 75206	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Costs	Description Consulting Costs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 39 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/29/2024	5 Payee name Rosemont Dads Club	
6 Amount (\$) 1500.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; 911 North Morocco Avenue, Dallas, TX 75211 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description Sponsor
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/29/2024	Payee name Ascension	
Amount (\$) 51.70 Officeholder Funds for Officeholder Expenditures	Payee address; 2708 Routh Street Dallas, TX 75201 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Breakfast mtg w housing advisor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/30/2024	Payee name Barnes and Nobles	
Amount (\$) 64.95 Officeholder Funds for Officeholder Expenditures	Payee address; 7700 West Northwest Highway Dallas, TX 75225 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description Gift for board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 40 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/04/2024	5 Payee name Tribal All Day Café	
6 Amount (\$) 38.28 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 263 North Bishop AvenueDallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Volunteer Expense	(b) Description Breakfast meeting with volunteer
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/04/2024	Payee name Hunkys Old Fashioned	
Amount (\$) 150.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 3930 Cedar Springs RoadDallas, TX 75218	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description Gift Card for neighborhood event
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/04/2024	Payee name ABC Party	
Amount (\$) 85.66 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1414 West Davis Street Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Supplies	Description Event supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 11/04/2024		5 Payee name Oak Cliff Lions Club			
6 Amount (\$) 100.00 Officeholder Funds for Officeholder Expenditures		7 Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Member Dues		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/04/2024		Payee name Oak Cliff Lions Club			
Amount (\$) 250.00 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation		Description Donation		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/04/2024		Payee name Extra Space			
Amount (\$) 98.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 1931 Fort Worth AvenueDallas, TX 75208			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Storage		Description Storage Fees		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 42 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/04/2024	5 Payee name Simply To Impress	
6 Amount (\$) 1154.45 Officeholder Funds for Officeholder Expenditures	7 Payee address; 3606 S Tyler Street Dallas, TX 75224 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Community cards
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/06/2024	Payee name Village Buger	
Amount (\$) 32.19 Officeholder Funds for Officeholder Expenditures	Payee address; 3699 McKinney Avenue Suite C325 Dallas, TX 75204 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meeting	Description Lunch meeting with city staff
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/07/2024	Payee name Cretias Bakery	
Amount (\$) 38.00 Officeholder Funds for Officeholder Expenditures	Payee address; 228 West Davis Street Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description Gifts for retiring board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 43 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/07/2024	5 Payee name Ascension	
6 Amount (\$) 42.33 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 2708 Routh Street Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meeting with Commissioner
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/08/2024	Payee name The UPS Store 78	
Amount (\$) 167.67 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1222 North Bishop Avenue Suite 200 Dallas , TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Postage and Mailing	Description Stamps
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/12/2024	Payee name Victoria Perez	
Amount (\$) 36.99 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 808 Rutherford Road Waxahachie, TX 75165	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Reimbursement for donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 44 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 11/12/2024		5 Payee name Parking			
6 Amount (\$) 34.35 Campaign Funds for Campaign Expenditures		7 Payee address; 2506 Northwest 2nd AveMiami Beach, FL 33127 City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fundraising		(b) Description Out of district travel - parking	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/12/2024		Payee name Joeys Italian			
Amount (\$) 30.24 Campaign Funds for Campaign Expenditures		Payee address; 2506 Northwest 2nd AveMiami Beach, FL 33127 City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fundraising		Description Out of district travel - meals	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/12/2024		Payee name Giannis Restaurant			
Amount (\$) 31.08 Campaign Funds for Campaign Expenditures		Payee address; 1116 Ocean Drive Miami Beach, FL 33139 City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fundraising		Description Out of district travel - meals	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 45 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/12/2024	5 Payee name Standard Miami	
6 Amount (\$) 691.23 Campaign Funds for Campaign Expenditures	7 Payee address; 40 Island Avenue Miami Beach, FL 33139 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fundraising	(b) Description Out of district travel - hotel
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/18/2024	Payee name The Spelled Milk	
Amount (\$) 75.00 Officeholder Funds for Officeholder Expenditures	Payee address; 712 West Davis Street Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description Gift cards for board members
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/18/2024	Payee name Legends Concession	
Amount (\$) 108.56 Officeholder Funds for Officeholder Expenditures	Payee address; 2045 East Division StreetArlington, TX 76011 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal with sports advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 46 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/18/2024	5 Payee name National Anthem	
6 Amount (\$) 72.98 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 2130 Commerce Street Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Meals	(b) Description Meal with city staff
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Ace Parking	
Amount (\$) 20.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 200 Crescent Court Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Out of district travel	Description Out of district travel - parking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Ascension	
Amount (\$) 30.68 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 2708 Routh Street Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meeting	Description Breakfast meeting with activist
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 47 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/19/2024	5 Payee name Chad West	
6 Amount (\$) 191.90 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 810 North Bishop Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Reimbursement for mileage	(b) Description Travel in District
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Susana Jaimes	
Amount (\$) 325.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 3606 N Bishop Avenue Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Contract Labor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/20/2024	Payee name Moxies Grill and Bar	
Amount (\$) 137.99 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 100 Crescent Court Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meeting	Description Dinner meeting with LIHTC developer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 48 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 11/21/2024		5 Payee name Oddfellows			
6 Amount (\$) 200.00 Officeholder Funds for Officeholder Expenditures		7 Payee address; 316 West Seventh Street Dallas, TX 75208 City; State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation		(b) Description Gift for neighborhood fundraiser		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/21/2024		Payee name Family Gateway			
Amount (\$) 1000.00 Officeholder Funds for Officeholder Expenditures		Payee address; 1421 West Mockingbird Lane Dallas, TX 75247 City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation		Description Donation		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/25/2024		Payee name Michaels			
Amount (\$) 102.76 Officeholder Funds for Officeholder Expenditures		Payee address; 751 Highway 67 Cedar Hill, TX 75104 City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Supplies		Description Office supplies		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 49 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/25/2024	5 Payee name MAILCHIMP	
6 Amount (\$) 171.63 Campaign Funds for Campaign Expenditures	7 Payee address; 405 N Angier Ave NE Atlanta, GA 30308 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description E newsletter
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/25/2024	Payee name Qualigraphics	
Amount (\$) 347.42 Campaign Funds for Campaign Expenditures	Payee address; 934 Stevens Woods Court Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Marketing materials
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/25/2024	Payee name USPS	
Amount (\$) 727.80 Officeholder Funds for Officeholder Expenditures	Payee address; 515 Centre Street Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Postage
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 50 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/27/2024	5 Payee name Benihana	
6 Amount (\$) 84.32 Officeholder Funds for Officeholder Expenditures	7 Payee address; 7775 Banner Drive Dallas, TX 75251 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Discussion with police assoc rep
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/27/2024	Payee name Elena Guzman	
Amount (\$) 785.00 Officeholder Funds for Officeholder Expenditures	Payee address; 306 S Montreal Avenue Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Help with community card mailer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/27/2024	Payee name Skate Parks for Dallas	
Amount (\$) 1000.00 Officeholder Funds for Officeholder Expenditures	Payee address; 100 Bachman Lake Park Loop Trail Dallas, TX 75220 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 51 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 11/29/2024		5 Payee name BBBop Seoul			
6 Amount (\$) 55.51 Officeholder Funds for Officeholder Expenditures		7 Payee address; City; State; Zip Code 828 West Davis Street Dallas, TX 75208			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Meals		(b) Description Lunch with bus assoc member		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/30/2024		Payee name Taco y Vino			
Amount (\$) 150.00 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 213 West Eighth Street Dallas, TX 75208			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts		Description Gift card for neighborhood		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/02/2024		Payee name USPS			
Amount (\$) 49.20 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 515 Centre Street Dallas, TX 75208			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Postage		Description Postage		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 52 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 12/02/2024		5 Payee name Legends Concession			
6 Amount (\$) 133.86 Campaign Funds for Campaign Expenditures		7 Payee address; 2045 East Division StreetArlington, TX 76011 City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fundraising		(b) Description Dinner with donors	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/02/2024		Payee name Aris Pantry			
Amount (\$) 189.22 Officeholder Funds for Officeholder Expenditures		Payee address; 1307 West Davis Street Dallas, TX 75208 City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Gifts		Description Gifts for neighborhood volunteers	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/02/2024		Payee name Target			
Amount (\$) 149.20 Campaign Funds for Campaign Expenditures		Payee address; 2418 North Haskell AvenueDallas, TX 75204 City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Supplies		Description Supplies for campaign office	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 53 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 12/02/2024	5 Payee name The UPS Store 78	
6 Amount (\$) 96.73 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1222 North Bishop Avenue Suite 200 Dallas , TX 75208 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing costs	(b) Description Printing
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Katy Seitzler	
Amount (\$) 210.00 Campaign Funds for Campaign Expenditures	Payee address; 217 Sycamore Creek Road Allen, TX 75002 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Contract Labor - Graphics
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Eatzi's Oak Lawn	
Amount (\$) 110.93 Officeholder Funds for Officeholder Expenditures	Payee address; 3403 Oak Lawn Avenue Dallas, TX 75219 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description Meal train for Oak Cliff family
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 54 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 12/03/2024	5 Payee name Stevens Park Golf Course	
6 Amount (\$) 150.71 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1005 North Montclair Avenue Dallas, TX 75208 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Meeting	(b) Description Community meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/03/2024	Payee name Extra Space	
Amount (\$) 113.00 Campaign Funds for Campaign Expenditures	Payee address; 1931 Fort Worth AvenueDallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Storage	Description Storage Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/05/2024	Payee name Flowers By Legacy	
Amount (\$) 210.79 Officeholder Funds for Officeholder Expenditures	Payee address; P.O. Box 1442 Evanston, IL 60201 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description Flowers for funeral
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 55 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 12/05/2024		5 Payee name Chad West			
6 Amount (\$) 1950.00 Officeholder Funds for Officeholder Expenditures		7 Payee address; 810 North Bishop AvenueDallas, TX 75208 City; State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Rent		(b) Description Office Rent Reimbursement Jul - Dec 24		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/05/2024		Payee name Chad West			
Amount (\$) 726.00 Officeholder Funds for Officeholder Expenditures		Payee address; 810 North Bishop AvenueDallas, TX 75208 City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Supplies		Description Office I-net reimbursement Jul - Dec 24		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/05/2024		Payee name Chad West			
Amount (\$) 1080.00 Officeholder Funds for Officeholder Expenditures		Payee address; 810 North Bishop AvenueDallas, TX 75208 City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Supplies		Description Phone Expense Reimbursement Jul - Dec 24		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 56 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 12/06/2024	5 Payee name Qualigraphics	
6 Amount (\$) 66.94 Campaign Funds for Campaign Expenditures	7 Payee address; 934 Stevens Woods Court Dallas, TX 75208 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Marketing materials
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/09/2024	Payee name American Airlines	
Amount (\$) 697.40 Officeholder Funds for Officeholder Expenditures	Payee address; 3200 E Airfield Drive DFW Airport, TX 75261 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel out of District	Description Travel out of district - site visit
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/10/2024	Payee name Dallas Morning News	
Amount (\$) 52.23 Officeholder Funds for Officeholder Expenditures	Payee address; 1954 Commerce Street Dallas, TX 75201 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Subscription	Description Subscription
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 57 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 12/11/2024	5 Payee name La Comida Mexican	
6 Amount (\$) 913.63 Campaign Funds for Campaign Expenditures	7 Payee address; 1101 North Beckley AveDallas, TX 75203 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fundraising	(b) Description Campaign Launch Party
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/11/2024	Payee name La Comida Mexican	
Amount (\$) 100.00 Officeholder Funds for Officeholder Expenditures	Payee address; 1101 North Beckley AveDallas, TX 75203 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description Gifts for Community volunteer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/11/2024	Payee name Amazon	
Amount (\$) 159.90 Officeholder Funds for Officeholder Expenditures	Payee address; 325 9th Avenue North Seattle, WA 98109 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Supplies	Description Office Supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 58 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 12/11/2024	5 Payee name Mammogram Poster Girls	
6 Amount (\$) 250.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; 408 West 8th Street Suite 103 Dallas, TX 75208 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description Mammogram Sponsor
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/11/2024	Payee name Taco y Vino	
Amount (\$) 61.93 Officeholder Funds for Officeholder Expenditures	Payee address; 213 West Eighth Street Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meeting	Description Lunch with neighborhood leader
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/11/2024	Payee name Chad West	
Amount (\$) 223.22 Officeholder Funds for Officeholder Expenditures	Payee address; 810 North Bishop AvenueDallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Reimbursement for mileage Oct - Dec	Description Travel in District
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 59 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 12/11/2024	5 Payee name Victoria Perez	
6 Amount (\$) 37.45 Officeholder Funds for Officeholder Expenditures	7 Payee address; 808 Rutherford Road Waxahachie, TX 75165 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Reimbursement	(b) Description Meals
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/12/2024	Payee name Dallas Morning News	
Amount (\$) 84.42 Officeholder Funds for Officeholder Expenditures	Payee address; 1954 Commerce Street Dallas, TX 75203 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Subscription	Description Subscription
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/13/2024	Payee name The Kessler School PTO	
Amount (\$) 500.00 Officeholder Funds for Officeholder Expenditures	Payee address; 1822 W 10th Street Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Event Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 60 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 12/13/2024	5 Payee name Bishop Street Market	
6 Amount (\$) 43.30 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 419 N Bishop Avenue Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts	(b) Description Gift for senior neighbor
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/13/2024	Payee name Enos Pizza	
Amount (\$) 100.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 407 North Bishop AvenueDallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description Gift card for office staff
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/13/2024	Payee name Las Palmas	
Amount (\$) 118.22 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 2708 Routh Street Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meals	Description Dinner with former CM Mark Clayton
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 61 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 12/16/2024	5 Payee name Hunkys Old Fashioned	
6 Amount (\$) 150.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 3930 Cedar Springs RoadDallas, TX 75219	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts	(b) Description Gifts for Supporters
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/16/2024	Payee name Dallas Youth Sports	
Amount (\$) 1000.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 2524 West Ledbetter DriveDallas, TX 75233	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Holiday Level Sponsor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/23/2024	Payee name Victoria Perez	
Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 810 Rutherford Road Dallas, TX 76065	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Contract Labor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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: 62 of 62		2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 12/23/2024		5 Payee name Benny Guzman			
6 Amount (\$) 200.00 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 306 S Montreal Avenue Dallas, TX 75208			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description Contract Labor		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/24/2024		Payee name The 23rd Senatorial District Tejano			
Amount (\$) 50.00 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 10432 High Hollow Drive Suite 141 Dallas, TX 75230			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Member Dues		Description Member Dues		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					