City Secretary's Office

Supplemen Officeholde	tal Report r			FOR Cover She	RM SR
1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST Chad	MI	2. Total Pages Filed: 34	
	NICKNAME	LAST West	SUFFIX	3. Office Held Council District	1
4. SUPPLEMENTAL REPORT TYPE	c January 15	🗶 30th day b	pefore election c Runoff	c 15th day after camp treasurer appointme (officeholder only)	
	c July 15	c 8th day be	fore election C Exceeded limit	d \$500 C Final Report	
5. PERIOD / COVERED		1/1/20	021 THROUGH 3/22/20	021	
6. ELECTION	Month Day Year				
	5/1/2021 c Primary c Runoff 🐰 General c Special c 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		\$0.00	
-		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$21,639.28			\$21,639.28
	EXPENDITURE	3. TOTAL OFFICE	HOLDER EXPENDITURES OF \$1	00 OR LESS, UNLESS ITEMIZED	\$ 0.00
	TOTALS	4. TOTAL OFFICEHOLDER EXPENDITURES \$27			\$ 27,761.08
8. POLITICAL	CONTRIBUTION TOTALS 5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OF LOANS, OR GUARANTEES OF LOANS), UNLESS IT		·	\$0.00	
(Campaign)		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 1,500.00	
	EXPENDITURE TOTALS	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 0.00	
	TOTALS	8. TOTAL POLITICAL EXPENDITURES \$ 0.00		\$ 0.00	
9. OFFICEHOLDER FUI FOR CAMPAIGN PUR			R AMOUNT OF OFFICEHOLDER (IDITURES DURING THE REPOR		\$0.00
10. AFFIDAVIT		is true		of perjury, that the accompa all information required to be	
AFFLY NOTABY CTA	MD / CEAL ADOMS		***ELECTRONICAL	LLY CERTIFIED***	
AFFIX NOTARY STAI	MP / SEAL ABOVE		Signature of Candi	date or Officeholder	
Sworn to and subscribed	before me, by the said Mr	Chad West		, this the 31st	day
of March , 2	20_21, to certify which	ch, witness my hand a	ınd seal of office.		
Signature of officer ac	dministering oath	Printed name of off	icer administering oath	Title of officer ad	ministering oath

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 1 of 17
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Chad West			
4 Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7 Amount of contribution (\$)
03/08/2021	William Addy		100.00
Officeholder	6 Contributor address; City; State;	Zip Code	
Contribution	3805 Lausanne Ave Dallas, T.	X 75208	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/21/2021	John Angle		250.00
Officeholder	Contributor address; City; State;	Zip Code	
Contribution	2420 S. Adams St. Ft. Worth	h, TX 76110	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (IE	D#:)	Amount of contribution (\$)
02/12/2021	Marcus Baker		23.44
Officeholder Contribution	Contributor address; City; State; 1326 Hollywood Ave. Dallas, T.	Zip Code X 75208	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/27/2021	Chris / Brent Bolding		25.00
Officeholder Contribution	Contributor address; City; State; 302 Rosemont Ave. Dallas, T.	Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 2 of 17
2 FILER NAME Mr Chad West			3 Filer ID (Ethics Commission Filers)
4 Date 01/13/2021 Officeholder Contribution 8 Principal occu	Jacob Brown 6 Contributor address; City; State; 1805 W. 29th St. Austin,	Zip Code TX 78703 9 Employer (See Instructi	7 Amount of contribution (\$) 949.70 ions)
Date 01/14/2021 Officeholder Contribution Principal occup	Sally Cain Contributor address; City; State;	Zip Code TX 75214 Employer (See Instruction	Amount of contribution (\$) 1000.00
Date 03/06/2021 Officeholder Contribution	Lauren Clayton Contributor address; City; State;	Zip Code	Amount of contribution (\$) 100.00
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 03/01/2021 Officeholder Contribution	-		Amount of contribution (\$) 949.70
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 3 of 17
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Chad West			
4 Date	5 Full name of contributor out-of-state PAC (ID	D#:)	7 Amount of contribution (\$)
03/09/2021	Casey Conner 6 Contributor address: City: State:	Zin Code	100.00
Officeholder Contribution	, , , , ,	rille, TX 75137	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor)#:)	Amount of contribution (\$)
02/23/2021	John Crowley		250.00
Officeholder	Contributor address; City; State;	Zip Code	
Contribution	1109 Lausanne Ave Dallas, T	X 75208	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	0#:)	Amount of contribution (\$)
03/20/2021	David Dunnigan 2		100.00
Officeholder Contribution	Contributor address; City; State; 2157 Kessler Ct. Dallas, TX		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 01/12/2021	Full name of contributor)#:)	Amount of contribution (\$) 94.70
Officeholder Contribution	Contributor address; City; State; 5540 Farquhar Dallas, TX	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 4 of 17
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Chad West			
4 Date	5 Full name of contributor out-of-state_PAC ((ID#:)	7 Amount of contribution (\$)
01/18/2021	Anne Foster		94.70
Officeholder	6 Contributor address; City; State;	Zip Code	
Contribution	221 N. Windomere Ave Dallas, 7	ΓX 75208	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/13/2021	Aimee Furness 2		500.00
Officeholder	Contributor address; City; State;	Zip Code	
Contribution	1950 W. Colorado Blvd. Dallas, T	ΓX 75208	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
03/22/2021	Jane Gaines		100.00
Officeholder Contribution	Contributor address; City; State; 2136 Kessler Ct. Dallas, 7	Zip Code ΓX 75208	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#·)	Amount of contribution (\$)
01/20/2021	Carl Ginsberg	, ,	100.00
Officeholder Contribution		Zip Code ΓX 75219	
Principal occup	nation / Job title (See Instructions)	Employer (See Instruct	ions)
	<u>'</u>		

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 5 of 17
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Chad West			
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)
03/05/2021	John Gomez		100.00
Officeholder	6 Contributor address; City; State;	Zip Code	
Contribution	314 S. Winnetka Ave. Dallas, T	TX 75208	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/25/2021	Peter Granoff		500.00
Officeholder	Contributor address; City; State;	Zip Code	
Contribution	2207 Kessler Woods Ct. Dallas, T	TX 75208	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/18/2021	Anne Hamilton		949.70
Officeholder Contribution	Contributor address; City; State; 5521 Swiss Ave. Dallas, T	Zip Code TX 75214	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor		Amount of contribution (\$)
03/22/2021	Rhonda Harris		50.00
Officeholder	Contributor address; City; State;	Zip Code	
Contribution	2322 Kessler Pkwy Dallas, T	TX 75208	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this for	m. 1	Total pages Schedule A1: 6 of 17
2 FILER NAME		3	Filer ID (Ethics Commission Filers)
Mr Chad West			
4 Date	5 Full name of contributor ut-of-state PAC (ID#	7	Amount of contribution (\$)
03/20/2021	Genifer Harrison		25.00
Officeholder	6 Contributor address; City; State;	Zip Code	
Contribution	617 S. Ravinia Dr. Dallas, TX	75211	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
Date	Full name of contributor	:)	Amount of contribution (\$)
02/11/2021	Daniel Huerta		100.00
Officeholder	Contributor address; City; State;		
Contribution	1414 Cedar Hill Ave. Dallas, TX	75208	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions	5)
Date	Full name of contributor	:)	Amount of contribution (\$)
03/05/2021	Charles Jones		949.70
Officeholder Contribution	Contributor address; City; State; 2 1029 Lausanne Ave Dallas, TX	·	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)
Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of contribution (\$)
01/26/2021	Eileen Josey		150.00
Officeholder Contribution	Contributor address; City; State; Z P.O. Box 223567 Dallas, TX		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 7 of 17
2 FILER NAME Mr Chad West			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)
02/20/2021	Michael Kaufman		250.00
Officeholder	6 Contributor address; City; State;		
Contribution	3731 Gilbert Ave. Dallas, T	X 75219	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/22/2021	Scott Larsen		100.00
Officeholder	Contributor address; City; State;	Zip Code	
Contribution	665 Kessler Reserve Ct. Dallas, T	TX 75208	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/20/2021	Don Livingston		250.00
Officeholder	Contributor address; City; State;	Zip Code	
Contribution	6628 Bryant Irvin Rd. Ft. Worth	h, TX 76132	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (I	 D#:)	Amount of contribution (\$)
03/03/2021	Stephen Long		50.00
Officeholder Contribution	-	Zip Code TX 75208	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 8 of 17
2 FILER NAME Mr Chad West			3 Filer ID (Ethics Commission Filers)
wir Chad west			
4 Date		(ID#:)	7 Amount of contribution (\$)
03/01/2021	David Luther		100.00
Officeholder	6 Contributor address; City; State;	Zip Code	
Contribution	619 Kessler Spgs. Ave. Dallas,	TX 75208	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/08/2021	Beda Mast 2		100.00
	Contributor address; City; State;	; Zip Code	100.00
Officeholder Contribution	1224 Lausanne Ave. Dallas,	TX 75208	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/05/2021	James Mathis		118.44
Officeholder Contribution	Contributor address; City; State; 2029 W. Colorado Blvd. Dallas,	Zip Code TX 75208	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/20/2021	Von McClure	, , ,	100.00
Officeholder Contribution		; Zip Code TX 75208	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 9 of 17
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Chad West			
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:)	7 Amount of contribution (\$)
01/03/2021	Samuel McDonald		50.00
Officeholder	6 Contributor address; City; State;	Zip Code	
Contribution	2630 Shelby Ave. Dallas, T	ΓX 75219	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/08/2021	Mark McPherson		100.00
Officeholder	Contributor address; City; State;	Zip Code	
Contribution	246 Waverly Dr. Dallas, 7	ΓX 75208	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/11/2021	David Micek		1000.00
Officeholder Contribution	Contributor address; City; State; 426 Monte Vista Dr. Dallas, 7	Zip Code ΓX 75223	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
03/20/2021	J. Pierce Monkres		100.00
Officeholder Contribution	-	Zip Code ΓX 75208	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 10 of 17
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Chad West			
4 Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7 Amount of contribution (\$)
01/11/2021	Michele Morgan		50.00
Officeholder	6 Contributor address; City; State;	Zip Code	
Contribution	631 S. Manus Dr. Dallas, T.	X 75224	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC (IE	D#:)	Amount of contribution (\$)
03/02/2021	DAVE NEUMANN		94.70
Officeholder	Contributor address; City; State;	Zip Code	
Contribution	6318 TURNER WAY DALLAS	S, TX 75230	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/04/2021	Marilee OConnell		949.70
Officeholder Contribution	Contributor address; City; State; 634 Kessler Reserve Ct. Dallas, T.	Zip Code X 75208	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/20/2021	Steven Pounders		949.70
Officeholder Contribution	Contributor address; City; State; 3525 Turtle Creek Blvd. Dallas, T	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 11 of 17
2 FILER NAME Mr Chad West			3 Filer ID (Ethics Commission Filers)
4 Date 03/01/2021 Officeholder Contribution 8 Principal occu	Dorotha Ocker 6 Contributor address; City; State; 1609 Marsh Ln. Carrollto	Zip Code on, TX 75006 9 Employer (See Instruct	7 Amount of contribution (\$) 237.20
Date 02/23/2021 Officeholder Contribution Principal occup	Chris Peirson Contributor address; City; State;	Zip Code TX 75244 Employer (See Instructi	Amount of contribution (\$) 949.70 ions)
Date 01/01/2021 Officeholder Contribution	Joel Perez Contributor address; City; State;	Zip Code ΓX 75224	Amount of contribution (\$) 25.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 01/17/2021 Officeholder Contribution	_		Amount of contribution (\$) 474.70
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 12 of 17
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Chad West			
4 Date	5 Full name of contributor out-of-state PAC (ID	D#:)	7 Amount of contribution (\$)
02/10/2021	Anjulie Ponce		100.00
Officeholder	6 Contributor address; City; State;	Zip Code	
Contribution	415 Allison Dr. Dallas, TX	X 75208	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/22/2021	John Wiley Price - Campaign		500.00
	Contributor address; City; State;	Zip Code	500.00
Officeholder Contribution	510 E. 5th St. Dallas, TX	X 75203	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC (ID	D#:)	Amount of contribution (\$)
03/22/2021	Michael Rawlings		949.70
Officeholder	Contributor address; City; State;	Zip Code	2.12.1.0
Contribution	3879 Maple Ave. Dallas, TX	•	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor)#·	Amount of contribution (\$)
01/02/2021	Susan Reese)	949.70
Officeholder Contribution	Contributor address; City; State; 8626 Douglas Ave. Dallas, TX	Zip Code X 75225	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 13 of 17					
2 FILER NAME Mr Chad West			3 Filer ID (Ethics Commission Filers)			
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)			
03/10/2021	Judith Reid		949.70			
Officeholder Contribution	6 Contributor address; City; State; 612 Spruce Ave. Lake Fo.	Zip Code rest, IL 60045				
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)			
Date	Full name of contributor	ID#:)	Amount of contribution (\$)			
02/02/2021	Denise Requardt		100.00			
Officeholder Contribution	Contributor address; City; State; 708 Woolsey Dr. Dallas, 7	Zip Code ΓX 75224				
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)			
Date	Full name of contributor	ID#:)	Amount of contribution (\$)			
03/20/2021	Amy Schaffner		30.00			
Officeholder Contribution	Contributor address; City; State; 1622 Oak Knoll St. Dallas, 7	Zip Code ΓX 75208				
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)			
01/26/2021	Pat Schenkel		1000.00			
Officeholder Contribution	Contributor address; City; State;	Zip Code ΓX 75208				
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)			

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SCHEDULE A1

The	The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 14 of 17				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Mr Chad West					
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)		
01/11/2021	Jon Bernard Schwartz		50.00		
Officeholder	6 Contributor address; City; State;	Zip Code			
Contribution	308 N. Montclair Ave. Dallas, T	TX 75208			
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)		
Date	Full name of contributor	ID#:)	Amount of contribution (\$)		
03/08/2021	Joanna St. Angelo		100.00		
Officeholder	Contributor address; City; State;	Zip Code			
Contribution	3221 Red Bird Ln. Grapevir	ne, TX 76051			
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)		
Date	Full name of contributor	ID#:)	Amount of contribution (\$)		
01/01/2021	Lisa Taylor		50.00		
Officeholder Contribution	Contributor address; City; State; 923 Salmon Dr. Dallas, T	Zip Code			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)		
Date	Full name of contributor	ID#:)	Amount of contribution (\$)		
01/02/2021	Rhonda Turner	·	50.00		
Officeholder	Contributor address; City; State;	Zip Code			
Contribution	-	TX 75211			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)		

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 15 of 17
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Chad West			
4 Date	5 Full name of contributor ut-of-state PAC (IE	D#:)	7 Amount of contribution (\$)
03/13/2021	Jesus Valadez		25.00
Officeholder	6 Contributor address; City; State;	Zip Code	
Contribution	717 W. Page Ave. Dallas, T.	X 75208	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/11/2021	Brent Van Loggerenberg		1000.00
Officeholder	Contributor address; City; State;	Zip Code	
Contribution	516 Monte Vista Dr. Dallas, T.	X 75223	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/11/2021	Thea Van Loggerenberg		1000.00
Officeholder Contribution	Contributor address; City; State; 516 Monte Vista Dr. Dallas, T.	· .	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/09/2021	Daniel Waldmann		237.20
Officeholder	Contributor address; City; State;	Zip Code	
Contribution	1111 N. Montclair Ave. Dallas, T.	X 75208	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

			1 Tabel annua Oakadula Adv
The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 16 of 17
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Chad West			
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
01/19/2021	Alan Walne		500.00
Officeholder	6 Contributor address; City; State;	Zip Code	
Contribution	10020 Caribou Trail Dallas, T	ΓX 75238	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	ons)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/04/2021	Teresa Wash 2		100.00
	Contributor address; City; State;	Zip Code	100.00
Officeholder Contribution	-	TX 75115	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructio	uns)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/16/2021	Lawrence Worden		100.00
Officeholder	Contributor address; City; State;	Zip Code	
Contribution	2019 Old Orchard Dr. Dallas, T	ΓX 75230	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructio	ons)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/06/2021	Shannon Wyatt	,	237.20
Officeholder Contribution		Zip Code ΓX 75208	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructio	ons)
1			

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 17 of 17
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Chad West			
4 Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7 Amount of contribution (\$)
03/10/2021	AAGD		1500.00
Campaign Contribution	6 Contributor address; City; State; 5728 LBJ Freeway Suite 100 Dallas, T.	-	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor)#:)	Amount of contribution (\$)
	Contributor address; City; State;		
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
	Contributor address; City; State;	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
	Contributor address; City; State;	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 1 of 16	2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/04/2021	Katy Seitzler		
6 Amount (\$) 480.00	7 Payee address; City; State; Zip Code 217 Sycamore Creek Roadllen, TX 75002		
Officeholder Funds for Officeholder Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Advertising Expense		utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	n, TX, officeholder living expense
		Email marketing, Ca Social Media	mpaign Communications and
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/06/2021	Oak Cliff Lions Club		
Amount (\$)	Payee address; City; State; Zip Code		
25.00	P.O. Box 4445 Dallas, TX 75208		
Officeholder Funds for Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Advertising Expense		ttside of Texas. Complete Schedule T.
EXPENDITURE			, TX, officeholder living expense
		Sponsorship	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/06/2021	Jesse Perez		
Amount (\$) 30.00	Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224		
Officeholder Funds for	3000 South Tyler Street Danas, TA 73224		
Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Contract Labor	Check if travel ou	utside of Texas. Complete Schedule T.
OF EXPENDITURE			n, TX, officeholder living expense
-		Campaign Help	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 2 of 16	2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/11/2021	Chad West PLLC		
6 Amount (\$) 30.20 Officeholder Funds for	7 Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224		
Officeholder Expenditures	(a) Catagory (0.2 Octobrida listed at the Acquisition asked the	(h) Description	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	utside of Texas. Complete Schedule T.
PURPOSE OF	Advertising Expense		n, TX, officeholder living expense
EXPENDITURE		Mailchimp Reimburs	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/12/2021	HOMEPAC of Greater Dallas		
Amount (\$) 500.00	Payee address; City; State; Zip Code		
Officeholder Funds for Officeholder Expenditures	5816 West Plano Parkwallano, TX 75093		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Reimbursement		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/12/2021	Dash for the Beads		
Amount (\$) 1000.00	Payee address; City; State; Zip Code 934 Stevens Woods CourtDallas, TX 75208		
Officeholder Funds for Officeholder Expenditures	754 Stevens Woods Coumbanas, 17 75206		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Advertising Expense		tside of Texas. Complete Schedule T.
OF EXPENDITURE		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 NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 3 of 16	2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/14/2021	Farrokh Nazerian		
6 Amount (\$) 3000.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 1978 Mission Ridge Roa 8 anta Barbara, CA 93103		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Reimbursement		utside of Texas. Complete Schedule T.
OF EXPENDITURE	Kembursenen	Check if Austin	n, TX, officeholder living expense onation overage
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/22/2021	Chad West		
Amount (\$) 250.33	Payee address; City; State; Zip Code		
Officeholder Funds for Officeholder Expenditures	3606 South Tyler Street Dallas, TX 75224		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		tside of Texas. Complete Schedule T. TX, officeholder living expense abursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/25/2021	Chad West PLLC		
Amount (\$) 31.27	Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224		
Officeholder Funds for Officeholder Expenditures	3000 South Tyler Street Dallas, 17, 73224		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Advertising Expense		tside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin Mailchimp Reimburs	, TX, officeholder living expense ement
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Carididate/Officerfolder/Politica	The Instruction Guide explains how to c	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 4 of 16	2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/29/2021	Liz Miller		
6 Amount (\$) 5000.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 1201 Bittern Drive Little Elm, TX 75068		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Contract Labor	Check if travel ou	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
EXPENDITORE		Campaign Help	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/03/2021	Qualigraphics, Inc		
Amount (\$)	Payee address; City; State; Zip Code		
1633.92 Officeholder Funds for	934 Stevens Woods CourDallas, TX 75208		
Officeholder Expenditures			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		tside of Texas. Complete Schedule T. TX, officeholder living expense ecals and Yard Stakes
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/04/2021	Benny Guzman		
Amount (\$) 177.03	Payee address; City; State; Zip Code 306 South Montreal Dallas, TX 75208		
Officeholder Funds for	Job South Wondear Danas, 1X 73206		
Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Contract Labor		tside of Texas. Complete Schedule T.
EXPENDITURE			, TX, officeholder living expense
		Volunteer Meal Reim	nbursement
Complete ONLY if direct		Office sought	Office held
expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office field

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

To total pages Schedule F1: 2 FILER NAME Mr. Chad West Mr	Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor	Other (enter a category not listed above)
Solid Mr. Chad West Solid Soli	Credit Card Payment	The Instruction Guide explains how to	complete this form.	
Complete CNLY if direct expenditures Category (See Category See Ca				3 Filer ID (Ethics Commission Filers)
Page address City State Zip Code	4 Date	5 Payee name		
15.0.00 Officeholder Funds for Officeholder Funds for Officeholder Expenditures Oscillator Contract Labor	02/09/2021	Benny Guzman		
Officeholder Expenditures		1		
PURPOSE OF EXPENDITURE Contract Labor Contra				
Contract Labor Contract Labor Contract Labor Check if Austin, TX, officeholder living expense Mileage Reimbursement	8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
## Septembritude Second Complete ONLY if direct expenditure to benefit C/OH		Contract Labor	Check if travel or	utside of Texas. Complete Schedule T.
9 Complete ONLY if direct expenditure to benefit C/OH Date	_		Check if Austin	n, TX, officeholder living expense
Date O2/11/2021 Amount (\$) 31.27 Officeholder Funds for Officeholder Expenditures Category (See Categories listed at the top of this schedule) Purpose OF EXPENDITURE Candidate / Officeholder name O2/12/2021 Edgar Johnson Amount (\$) 31.27 Category (See Categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name Office sought Office sought Office held Payee name O2/12/2021 Edgar Johnson Amount (\$) 371.00 Officeholder Expenditures Purpose OF EXPENDITURE Category (See Categories listed at the top of this schedule) Date Payee name O2/12/2021 Edgar Johnson Amount (\$) 371.00 Officeholder Expenditures Category (See Categories listed at the top of this schedule) Date Payee address; City; State; Zip Code 3636 West Redbird Lane Suite 821 Dallas, TX 75237 Category (See Categories listed at the top of this schedule) Contract Labor Contract Labor Category (See Categories listed at the top of this schedule) Campaign Help Campaign Help Campilete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			Mileage Reimbursen	nent
Amount (8) 31.27 Officeholder Funds for Officeholder Expenditures Category (See Categories listed at the top of this schedule) Payee name Complete ONLY if direct expenditures Category (See Categories listed at the top of this schedule) Amount (8) 31.00 Officeholder Expenditure Candidate / Officeholder name Office sought Category (See Categories listed at the top of this schedule) Advertising Expense Category (See Categories listed at the top of this schedule) Advertising Expense Description Check if Austin, TX, officeholder living expense Mailchimp Reimbursement Office sought Office sought Office held Payee name 02/12/2021 Edgar Johnson Amount (8) 371.00 Officeholder Expenditures Payee address: City: State: Zip Code 3636 West Redbird Lane Suite 821 Dallas, TX 75237 Category (See Categories listed at the top of this schedule) Contract Labor Category (See Categories listed at the top of this schedule) Contract Labor Candidate / Officeholder name Office sought Office sought Office held Complete ONLY if direct expenditures Candidate / Officeholder name Office sought Office sought Office held			Office sought	Office held
Amount (\$) 31.27 Officeholder Funds for Officeholder Expenditures Payee address: City: State: Zip Code 3606 South Tyler Street Dallas, TX 75224 Payee address: City: State: Zip Code 3606 South Tyler Street Dallas, TX 75224 Payee address: City: State: Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Irving expense Mailchimp Reimbursement Complete ONLY if direct expenditure to benefit C/OH	Date	Payee name		
Officeholder Funds for Officeholder Expenditures Purpose Officeholder Expenditures	02/11/2021	Chad West PLLC		
Officeholder Funds for Officeholder Expenditures Category (See Categories listed at the top of this schedule)		Payee address; City; State; Zip Code		
Officeholder Expenditures Category (See Categories listed at the top of this schedule)		3606 South Tyler Street Dallas, TX 75224		
PURPOSE OF EXPENDITURE Advertising Expense Advertising Expense Advertising Expense Advertising Expense Check if Austin, TX, officeholder living expense Mailchimp Reimbursement Office sought Office held Office held Date Payee name 02/12/2021 Edgar Johnson Amount (\$) 371.00 Officeholder Funds for Officeholder Expenditures Purpose Officeholder Expenditures Category (See Categories listed at the top of this schedule) Contract Labor Category (See Categories listed at the top of this schedule) Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office sought Office held Office held				
Advertising Expense Check if Austin, TX, officeholder living expense		Category (See Categories listed at the top of this schedule)		
Complete ONLY if direct expenditure to benefit C/OH Date Payee name 02/12/2021 Edgar Johnson Amount (\$) 371.00 Officeholder Funds for Officeholder Expenditures Purpose OF EXPENDITURE Candidate / Officeholder name Candidate / Officeholder name Officeholder sunds for Officeholder Schedules Category (See Categories listed at the top of this schedule) Campaign Help Candidate / Officeholder name Office sought Office held		Advertising Expense		·
Complete ONLY if direct expenditure to benefit C/OH Date Payee name O2/12/2021 Amount (\$) 371.00 Officeholder Funds for Officeholder Expenditures Purpose OF EXPENDITURE Candidate / Officeholder name Office sought Office sought Office sought Office sought Office held Office sought Office held Office held Office held Office sought Office held Office held Office held Office sought Office held Office sought Office held	_		Check if Austin	n, TX, officeholder living expense
Date Date Payee name Edgar Johnson Amount (\$) 371.00 Officeholder Funds for Officeholder Expenditures PURPOSE OF EXPENDITURE Candidate / Officeholder name Candidate / Officeholder name Candidate / Officeholder name Candidate / Officeholder name Office sought Office sought Office held			Mailchimp Reimburs	sement
Amount (\$) 371.00 Payee address; City; State; Zip Code 3636 West Redbird Lane Suite 821 Dallas, TX 75237			Office sought	Office held
Amount (\$) 371.00 Officeholder Funds for Officeholder Expenditures PURPOSE OF EXPENDITURE Payee address; City; State; Zip Code 3636 West Redbird Lane Suite 821 Dallas, TX 75237 Category (See Categories listed at the top of this schedule) Contract Labor Category (See Categories listed at the top of this schedule) Contract Labor Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Help Candidate / Officeholder name Office sought Office held	Date	Payee name		
Officeholder Funds for Officeholder Expenditures Category (See Categories listed at the top of this schedule) PURPOSE OF EXPENDITURE Candidate / Officeholder name Candidate / Officeholder name Candidate / Officeholder name Office sought Office held	02/12/2021	Edgar Johnson		
Officeholder Funds for Officeholder Expenditures Category (See Categories listed at the top of this schedule) PURPOSE OF EXPENDITURE Candidate / Officeholder name Candidate / Officeholder name Candidate / Officeholder name Office sought Office held	Amount (\$) 371.00			
Officeholder Expenditures Category (See Categories listed at the top of this schedule) Contract Labor Contract Labor Contract Labor Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Help Candidate / Officeholder name Office sought Office held				
PURPOSE OF EXPENDITURE Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Help Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		,		
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Check if Austin, TX, officeholder living expense Campaign Help Office sought Office held		Category (See Categories listed at the top of this schedule)	Description	
Campaign Help Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	PURPOSE	Contract Labor	Check if travel ou	utside of Texas. Complete Schedule T.
Campaign Help Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	_		Check if Austin	n, TX, officeholder living expense
expenditure to benefit C/OH	LAFENDITORE		Campaign Help	
expenditure to benefit C/OH				
ATTACH ARRITIONAL CORIES OF THIS COLIFRING I ACMERCE			Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Others (actors a extragal year listed above)

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 6 of 16	2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/18/2021	Oak Cliff Lions Club		
6 Amount (\$) 25.00	7 Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208		
Officeholder Funds for Officeholder Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Advertising Expense		utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	n, TX, officeholder living expense
		Membership Dues	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/20/2021	Roxanne Powell		
Amount (\$) 65.00	Payee address; City; State; Zip Code		
Officeholder Funds for	808 Rutherford Road Waxahachie, TX 75165		
Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Contract Labor	Check if travel out	tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
		Campaign Help	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/20/2021	Jocelyn Powell		
Amount (\$) 65.00	Payee address; City; State; Zip Code 808 Rutherford Road Waxahachie, TX 75165		
Officeholder Funds for	808 Rutherford Road Waxahachie, TX 75165		
Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Contract Labor	Check if travel ou	tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
LA LIBITOTE		Campaign Help	
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OF		Cilido Sougrit	Since field
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Carididate/Officerfolder/Politica	The Instruction Guide explains how to c	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 7 of 16	2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	I	
02/24/2021	Anthony Jaramillo		
6 Amount (\$) 168.75 Officeholder Funds for	7 Payee address; City; State; Zip Code 2650 East Melissa Road Suite 626 Melissa, TX 75454		
Officeholder Expenditures	(1) 0	1425	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	tside of Texas. Complete Schedule T.
PURPOSE OF	Contract Labor		, TX, officeholder living expense
EXPENDITURE		Campaign Help	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/24/2021	Roxanne Powell		
Amount (\$) 10.00	Payee address; City; State; Zip Code		
Officeholder Funds for	808 Rutherford Road Waxahachie, TX 75165		
Officeholder Expenditures			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/24/2021	Jocelyn Powell		
Amount (\$) 10.00	Payee address; City; State; Zip Code 808 Rutherford Road Waxahachie, TX 75165		
Officeholder Funds for Officeholder Expenditures	waxanaenie, 17/3103		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Contract Labor		side of Texas. Complete Schedule T.
EXPENDITURE		Campaign Help	TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Carididate/Officerfolder/Politica	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 8 of 16	2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/24/2021	Edgar Johnson		
6 Amount (\$) 67.50 Officeholder Funds for	7 Payee address; City; State; Zip Code 3636 West Redbird Lane Suite 821 Dallas, TX 75237		
Officeholder Expenditures	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
8 PURPOSE			utside of Texas. Complete Schedule T.
PURPOSE OF	Contract Labor	Check if Austin	, TX, officeholder living expense
EXPENDITURE		Campaign Help	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/01/2021	Chad West PLLC		
Amount (\$)	Payee address; City; State; Zip Code		
31.26	3606 South Tyler Street Dallas, TX 75224		
Officeholder Funds for Officeholder Expenditures			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense ement
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/02/2021	o i diwi . di i		
03/02/2021	Oak Cliff Lions Club		
Amount (\$) 25.00	Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208		
Officeholder Funds for Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Advertising Expense		tside of Texas. Complete Schedule T.
OF EXPENDITURE			, TX, officeholder living expense
		Membership Dues	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 9 of 16	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	<u>'</u>
03/02/2021	Full Moon Design	
6 Amount (\$) 216.50	7 Payee address; City; State; Zip Code P.O. Box 152020 Austin, TX 78715	
Officeholder Funds for Officeholder Expenditures		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
EXI ENDITORE		Custom Campaign Door Hangers
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought Office held
Date	Payee name	
03/02/2021	Qualigraphics	
Amount (\$)	Payee address; City; State; Zip Code	
494.15	934 Stevens Woods CourDallas, TX 75208	
Officeholder Funds for Officeholder Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		Yard Sign Stakes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
03/05/2021	Pasos for Oak Cliff	
Amount (\$) 50.00	Payee address; City; State; Zip Code	
Officeholder Funds for	3606 South Tyler Street Dallas, TX 75208	
Officeholder Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
LAF LINDITORE		Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 10 of 16	2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/05/2021	Katy Seitzler		
6 Amount (\$) 1393.50 Officeholder Funds for	7 Payee address; City; State; Zip Code 217 Sycamore Creek Roadllen, TX 75002		
Officeholder Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Advertising Expense		utside of Texas. Complete Schedule T.
EXPENDITURE			n, TX, officeholder living expense
		Email marketing, Car Social Media	mpaign Communications and
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/05/2021	Edgar Johnson		
Amount (\$) 188.00	Payee address; City; State; Zip Code		
Officeholder Funds for	3636 West Redbird Lane Suite 821 Dallas, TX 75237		
Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Contract Labor		tside of Texas. Complete Schedule T.
EXPENDITURE			, TX, officeholder living expense
		Campaign Help	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/05/2021	A 41 T 31		
03/05/2021	Anthony Jaramillo		
Amount (\$) 210.00	Payee address; City; State; Zip Code 2650 East Melissa Road Melissa, TX 75454		
Officeholder Funds for Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Contract Labor	Check if travel ou	tside of Texas. Complete Schedule T.
OF EXPENDITURE			, TX, officeholder living expense
		Campaign Help	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
expenditure to beliefit G/OF	·		
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 11 of 16	2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/09/2021	EcoLatino		
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 2320 West Davis Street Dallas, TX 75208		
Officeholder Funds for Officeholder Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Advertising Expense		utside of Texas. Complete Schedule T.
OF EXPENDITURE		Marketing	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/09/2021	The Well Community		
Amount (\$) 250.00	Payee address; City; State; Zip Code		
Officeholder Funds for Officeholder Expenditures	125 Sunset Avenue Dallas, TX 75208		
•	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Advertising Expense	Check if travel out	tside of Texas. Complete Schedule T.
OF EXPENDITURE	6 1	Check if Austin	, TX, officeholder living expense
EXPENDITORE		Sponsorship	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/09/2021	Benny Guzman		
Amount (\$) 50.00	Payee address; City; State; Zip Code 306 South Montreal Dallas, TX 75208		
Officeholder Funds for	Job South Wonteau Danas, 1X 73206		
Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Contract Labor		tside of Texas. Complete Schedule T.
OF EXPENDITURE			, TX, officeholder living expense
		Table and Gas Reimb	pursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 12 of 16	2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/10/2021	Chad West PLLC		
6 Amount (\$) 31.26	7 Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224		
Officeholder Funds for Officeholder Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Advertising Expense	Check if travel or	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austir	n, TX, officeholder living expense
		Mailchimp Reimburs	sement
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/10/2021	Liz Miller		
Amount (\$)	Payee address; City; State; Zip Code		
1000.00	1201 Bittern Drive Little Elm, TX 75068		
Officeholder Funds for Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Contract Labor	Check if travel ou	tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
		Campaign Help	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/10/2021	Anthony Jaramillo		
Amount (\$) 190.00	Payee address; City; State; Zip Code		
Officeholder Funds for	2650 East Melissa Road Suite 626 Melissa, TX 75454		
Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Contract Labor	Check if travel ou	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	n, TX, officeholder living expense
EXPENDITURE		Campaign Help	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	Al Committee Legal Services Salaries/	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 13 of 16	2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/10/2021	AAGD		
6 Amount (\$) 1000.00	7 Payee address; City; State; Zip Code 5728 LBJ Freeway Suite 100		
Officeholder Funds for Officeholder Expenditures	Dallas, TX 75240		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Reimbursement		utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	n, TX, officeholder living expense
		Reimbursement for d	lonation overage
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/11/2021	Chad West		
Amount (\$)	Payee address; City; State; Zip Code		
1108.79	3606 South Tyler Street Dallas, TX 75224		
Officeholder Funds for Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Reimbursement		ttside of Texas. Complete Schedule T.
EXPENDITURE			, TX, officeholder living expense
		Reimbursement for n	narketing materials
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/11/2021	Qualigraphics, Inc		
Amount (\$) 1980.73	Payee address; City; State; Zip Code 934 Stevens Woods CourtDallas, TX 75208		
Officeholder Funds for	934 Stevens Woods Coumbanas, 1A /3208		
Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Advertising Expense	Check if travel ou	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	n, TX, officeholder living expense
		Door Hangers	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL CODIES OF THE	COUEDINE AC NE	EDED.
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	בטבט

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 14 of 16	2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/11/2021	Qualigraphics, Inc		
6 Amount (\$) 265.12	7 Payee address; City; State; Zip Code 934 Stevens Woods CourtDallas, TX 75208		
Officeholder Funds for Officeholder Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Advertising Expense	Check if travel or	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	n, TX, officeholder living expense
		Envelopes for Campa	aign
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/15/2021	Taylor Adams		
Amount (\$)	Payee address; City; State; Zip Code		
2000.00	519 North Oak Cliff Boulevard		
Officeholder Funds for Officeholder Expenditures	Dallas, TX 75208		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Contract Labor		tside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin	, TX, officeholder living expense
		Consulting Work	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/18/2021	Liz Miller		
Amount (\$) 43.30	Payee address; City; State; Zip Code		
Officeholder Funds for	1201 Bittern Drive Little Elm, TX 75068		
Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Meals	Check if travel ou	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	n, TX, officeholder living expense
EXPENDITORE		Volunteer Meal Rein	nbursement
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 15 of 16	2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/18/2021	Benjamin Calhoun		
6 Amount (\$) 190.00	7 Payee address; City; State; Zip Code 2650 East Melissa Road Suite 626		
Officeholder Funds for Officeholder Expenditures	Melissa, TX 75454		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Contract Labor		utside of Texas. Complete Schedule T.
OF EXPENDITURE		Campaign Help	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/18/2021	Darnella Wilson		
Amount (\$) 137.50	Payee address; City; State; Zip Code		
Officeholder Funds for	9747 Whitehurst Drive Suite 80 Dallas, TX 75243		
Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Contract Labor		tside of Texas. Complete Schedule T.
EXPENDITURE			, TX, officeholder living expense
		Campaign Help	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/18/2021	Liz Miller		
Amount (\$) 1000.00	Payee address; City; State; Zip Code		
Officeholder Funds for	1201 Bittern Drive Little Elm, TX 75068		
Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Contract Labor	Check if travel ou	tside of Texas. Complete Schedule T.
OF EXPENDITURE			, TX, officeholder living expense
		Campaign Help	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 16 of 16	2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/19/2021	Nyx Mendoza		
6 Amount (\$) 108.00	7 Payee address; City; State; Zip Code 9633 County Road 800 Royce City, TX 75189		
Officeholder Funds for Officeholder Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Contract Labor		itside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
EXI ENDITORE		Campaign Help	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/19/2021	Walls Printing		
Amount (\$) 1776.70	Payee address; City; State; Zip Code		
Officeholder Funds for	9171 King Arthur Dallas, TX 75247		
Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Advertising Expense	Check if travel out	tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin,	, TX, officeholder living expense
		Postcard - mailers	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/19/2021	Benny Guzman		
Amount (\$) 400.00	Payee address; City; State; Zip Code		
Officeholder Funds for	306 South Montreal Dallas, TX 75208		
Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Contract Labor	Check if travel out	tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
EXPENDITURE		Campaign Help	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED