

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

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

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

36

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY			
	Mr	Chad					
	NICKNAME	LAST	SUFFIX	Date Received			
		West					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #;		CITY;	STATE;	ZIP CODE		
	3606 S Tyler Street		Dallas	TX	75224		
	<input type="checkbox"/> Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(214)	509 7555					
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Date Hand-delivered or Date Postmarked			
	Mr	Benny		Receipt #	Amount \$		
	NICKNAME	LAST	SUFFIX	Date Processed			
		Guzman		Date Imaged			
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;		CITY;	STATE;	ZIP CODE		
(Residence or Business)	306 S Montreal Ave		Dallas	TX	75208		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	()						
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 (Attach C/OH - FR)						
10 PERIOD COVERED	Month	Day	Year	Month	Day	Year	
	01	01	2021	THROUGH	03	22	2021
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	
	05	01	2021	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any) Council District 1			13 OFFICE SOUGHT (if known) Council District 1			

GO TO PAGE 2

FORM C/OH
COVER SHEET PG 2

Forms provided by Texas Ethics Commission www.ethics.state.tx.us Revised 9/8/2015

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME

Mr Chad West

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 23,139.28
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 27,761.08
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 17**2** FILER NAME

Mr Chad West

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

03/08/2021

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

William Addy

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

3805 Lausanne Ave

Dallas, TX 75208

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

Date

03/21/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Angle

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

2420 S. Adams St.

Ft. Worth, TX 76110

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/12/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Marcus Baker

Amount of contribution (\$)

23.44

Contributor address;

City; State; Zip Code

1326 Hollywood Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/27/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris / Brent Bolding

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

302 Rosemont Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
2 of 17**2** FILER NAME

Mr Chad West

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

01/13/2021

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

Jacob Brown

7 Amount of contribution (\$)

949.70

6 Contributor address;

City; State; Zip Code

1805 W. 29th St.

Austin, TX 78703

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

Date

01/14/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sally Cain

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

6307 Club Lake Ct.

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lauren Clayton

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

918 Thomasson Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/01/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Richard Collins

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

8150 N Central Expwy.

Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 17**2** FILER NAME

Mr Chad West

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

03/09/2021

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

Casey Conner

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

1811 Green Tree Ln.

Duincanville, TX 75137

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

Date

02/23/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Crowley

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

1109 Lausanne Ave

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Dunnigan 2

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

2157 Kessler Ct.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/12/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Christopher Edgemon

Amount of contribution (\$)

94.70

Contributor address;

City; State; Zip Code

5540 Farquhar

Dallas, TX 75209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 17**2** FILER NAME

Mr Chad West

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

01/18/2021

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

Anne Foster

7 Amount of contribution (\$)

94.70

6 Contributor address;

City; State; Zip Code

221 N. Windomere Ave

Dallas, TX 75208

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

Date

03/13/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Aimee Furness 2

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

1950 W. Colorado Blvd.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/22/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jane Gaines

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

2136 Kessler Ct.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/20/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carl Ginsberg

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

2905 Wellborn St.

Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
5 of 17**2** FILER NAME

Mr Chad West

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

03/05/2021

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

John Gomez

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

314 S. Winnetka Ave.

Dallas, TX 75208

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

Date

02/25/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Peter Granoff

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

2207 Kessler Woods Ct.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/18/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Anne Hamilton

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

5521 Swiss Ave.

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/22/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Rhonda Harris

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

2322 Kessler Pkwy

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
6 of 17**2** FILER NAME

Mr Chad West

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

03/20/2021

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

Genifer Harrison

7 Amount of contribution (\$)

25.00

6 Contributor address;

City; State; Zip Code

617 S. Ravinia Dr.

Dallas, TX 75211

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

Date

02/11/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Daniel Huerta

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1414 Cedar Hill Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/05/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Charles Jones

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

1029 Lausanne Ave

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/26/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Eileen Josey

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

P.O. Box 223567

Dallas, TX 75222

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7 of 17**2** FILER NAME

Mr Chad West

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

02/20/2021

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

Michael Kaufman

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

3731 Gilbert Ave.

Dallas, TX 75219

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

Date

01/22/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Scott Larsen

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

665 Kessler Reserve Ct.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Don Livingston

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

6628 Bryant Irvin Rd.

Ft. Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/03/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Stephen Long

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

902 Thomasson Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8 of 17**2** FILER NAME

Mr Chad West

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

03/01/2021

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

David Luther

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

619 Kessler Spgs. Ave.

Dallas, TX 75208

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

Date

03/08/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Beda Mast 2

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1224 Lausanne Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/05/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James Mathis

Amount of contribution (\$)

118.44

Contributor address;

City; State; Zip Code

2029 W. Colorado Blvd.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Von McClure

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1603 Oak Knoll St.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
9 of 17**2** FILER NAME

Mr Chad West

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

01/03/2021

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

Samuel McDonald

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

2630 Shelby Ave.

Dallas, TX 75219

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

Date

03/08/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mark McPherson

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

246 Waverly Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/11/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Micek

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

426 Monte Vista Dr.

Dallas, TX 75223

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

J. Pierce Monkres

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1210 N. Clinton Ave

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
10 of 17**2** FILER NAME

Mr Chad West

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

01/11/2021

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

Michele Morgan

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

631 S. Manus Dr.

Dallas, TX 75224

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

Date

03/02/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

DAVE NEUMANN

Amount of contribution (\$)

94.70

Contributor address;

City; State; Zip Code

6318 TURNER WAY

DALLAS, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/04/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Marilee OConnell

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

634 Kessler Reserve Ct.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Steven Pounders

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

3525 Turtle Creek Blvd.

Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
11 of 17**2** FILER NAME

Mr Chad West

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

03/01/2021

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

Dorotha Ocker

7 Amount of contribution (\$)

237.20

6 Contributor address;

City; State; Zip Code

1609 Marsh Ln.

Carrollton, TX 75006

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

Date

02/23/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris Peirson

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

4400 Alpha Rd.

Dallas, TX 75244

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/01/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joel Perez

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

1303 Lansford Ave.

Dallas, TX 75224

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/17/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Audrey Pinkerton

Amount of contribution (\$)

474.70

Contributor address;

City; State; Zip Code

434 W. Greenbriar Ln.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
12 of 17**2** FILER NAME

Mr Chad West

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

02/10/2021

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

Anjolie Ponce

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

415 Allison Dr.

Dallas, TX 75208

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

Date

03/22/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Wiley Price - Campaign

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

510 E. 5th St.

Dallas, TX 75203

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/22/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Rawlings

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

3879 Maple Ave.

Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/02/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Susan Reese

Amount of contribution (\$)

949.70

Contributor address;

City; State; Zip Code

8626 Douglas Ave.

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
13 of 17**2** FILER NAME

Mr Chad West

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

03/10/2021

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

Judith Reid

7 Amount of contribution (\$)

949.70

6 Contributor address;

City; State; Zip Code

612 Spruce Ave.

Lake Forest, IL 60045

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

Date

02/02/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Denise Requardt

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

708 Woolsey Dr.

Dallas, TX 75224

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amy Schaffner

Amount of contribution (\$)

30.00

Contributor address;

City; State; Zip Code

1622 Oak Knoll St.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/26/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Pat Schenkel

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

614 N. Bishop Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
14 of 17**2** FILER NAME

Mr Chad West

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

01/11/2021

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

Jon Bernard Schwartz

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

308 N. Montclair Ave.

Dallas, TX 75208

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

Date

03/08/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joanna St. Angelo

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

3221 Red Bird Ln.

Grapevine, TX 76051

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/01/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lisa Taylor

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

923 Salmon Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/02/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Rhonda Turner

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

2830 W. Jefferson Blvd.

Dallas, TX 75211

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
15 of 17**2** FILER NAME

Mr Chad West

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

03/13/2021

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

Jesus Valadez

7 Amount of contribution (\$)

25.00

6 Contributor address;

City; State; Zip Code

717 W. Page Ave.

Dallas, TX 75208

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

Date

01/11/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brent Van Loggerenberg

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

516 Monte Vista Dr.

Dallas, TX 75223

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/11/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Thea Van Loggerenberg

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

516 Monte Vista Dr.

Dallas, TX 75223

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/09/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Daniel Waldmann

Amount of contribution (\$)

237.20

Contributor address;

City; State; Zip Code

1111 N. Montclair Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
16 of 17**2** FILER NAME

Mr Chad West

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

01/19/2021

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

Alan Walne

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

10020 Caribou Trail

Dallas, TX 75238

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

Date

01/04/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Teresa Wash 2

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

420 Kearsarge St.

Desoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/16/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lawrence Worden

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

2019 Old Orchard Dr.

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Shannon Wyatt

Amount of contribution (\$)

237.20

Contributor address;

City; State; Zip Code

103 N. Winnetka Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
17 of 17

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

03/10/2021

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

AAGD

6 Contributor address;

City; State; Zip Code

5728 LBJ Freeway Suite 100

Dallas, TX 75240

7 Amount of contribution (\$)

1500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

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.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 16	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 01/04/2021	5 Payee name Katy Seitzler	
6 Amount (\$) 480.00	7 Payee address; City; State; Zip Code 217 Sycamore Creek Road Allen, TX 75002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email marketing, Campaign Communications and Social Media
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 01/06/2021	Payee name Oak Cliff Lions Club	
Amount (\$) 25.00	Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 01/06/2021	Payee name Jesse Perez	
Amount (\$) 30.00	Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 16		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 01/11/2021		5 Payee name Chad West PLLC			
6 Amount (\$) 30.20		7 Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailchimp Reimbursement	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/12/2021		Payee name HOMEPAC of Greater Dallas			
Amount (\$) 500.00		Payee address; City; State; Zip Code 5816 West Plano Parkway Plano, TX 75093			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Reimbursement		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for donation overage	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/12/2021		Payee name Dash for the Beads			
Amount (\$) 1000.00		Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 16	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 01/14/2021	5 Payee name Farrokh Nazerian	
6 Amount (\$) 3000.00	7 Payee address; City; State; Zip Code 1978 Mission Ridge Road Santa Barbara, CA 93103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for donation overage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/22/2021	Candidate / Officeholder name Chad West	
Amount (\$) 250.33	Office sought Office held	
Payee name Chad West	Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer Meal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/25/2021	Candidate / Officeholder name Chad West PLLC	
Amount (\$) 31.27	Office sought Office held	
Payee name Chad West PLLC	Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailchimp Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4 of 16	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 01/29/2021	5 Payee name Liz Miller	
6 Amount (\$) 5000.00	7 Payee address; City; State; Zip Code 1201 Bittern Drive Little Elm, TX 75068	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 02/03/2021	Payee name Qualigraphics, Inc	
Amount (\$) 1633.92	Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Re-Elect T-Shirts, Decals and Yard Stakes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 02/04/2021	Payee name Benny Guzman	
Amount (\$) 177.03	Payee address; City; State; Zip Code 306 South Montreal Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer Meal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5 of 16	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 02/09/2021	5 Payee name Benny Guzman	
6 Amount (\$) 150.00	7 Payee address; City; State; Zip Code 306 South Montreal Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 02/11/2021	Payee name Chad West PLLC	
Amount (\$) 31.27	Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailchimp Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 02/12/2021	Payee name Edgar Johnson	
Amount (\$) 371.00	Payee address; City; State; Zip Code 3636 West Redbird Lane Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6 of 16		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 02/18/2021		5 Payee name Oak Cliff Lions Club			
6 Amount (\$) 25.00		7 Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/20/2021		Payee name Roxanne Powell			
Amount (\$) 65.00		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) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/20/2021		Payee name Jocelyn Powell			
Amount (\$) 65.00		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) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7 of 16	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 02/24/2021	5 Payee name Anthony Jaramillo	
6 Amount (\$) 168.75	7 Payee address; City; State; Zip Code 2650 East Melissa Road Suite 626 Dallas, TX 75454	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 02/24/2021	Payee name Roxanne Powell	
Amount (\$) 10.00	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) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 02/24/2021	Payee name Jocelyn Powell	
Amount (\$) 10.00	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) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8 of 16		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 02/24/2021		5 Payee name Edgar Johnson			
6 Amount (\$) 67.50		7 Payee address; City; State; Zip Code 3636 West Redbird Lane Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/01/2021		Payee name Chad West PLLC			
Amount (\$) 31.26		Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailchimp Reimbursement	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/02/2021		Payee name Oak Cliff Lions Club			
Amount (\$) 25.00		Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9 of 16		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/02/2021		5 Payee name Full Moon Design			
6 Amount (\$) 216.50		7 Payee address; City; State; Zip Code P.O. Box 152020 Austin, TX 78715			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Custom Campaign Door Hangers	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/02/2021		Payee name Qualigraphics			
Amount (\$) 494.15		Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Sign Stakes	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/05/2021		Payee name Pasos for Oak Cliff			
Amount (\$) 50.00		Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 10 of 16		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/05/2021		5 Payee name Katy Seitzler			
6 Amount (\$) 1393.50		7 Payee address; City; State; Zip Code 217 Sycamore Creek Road Allen, TX 75002			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email marketing, Campaign Communications and Social Media	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/05/2021		Payee name Edgar Johnson			
Amount (\$) 188.00		Payee address; City; State; Zip Code 3636 West Redbird Lane Dallas, TX 75237			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/05/2021		Payee name Anthony Jaramillo			
Amount (\$) 210.00		Payee address; City; State; Zip Code 2650 East Melissa Road Melissa, TX 75454			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11 of 16	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 03/09/2021	5 Payee name EcoLatino	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 2320 West Davis Street Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/09/2021	Payee name The Well Community	
Amount (\$) 250.00	Payee address; City; State; Zip Code 125 Sunset Avenue Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/09/2021	Payee name Benny Guzman	
Amount (\$) 50.00	Payee address; City; State; Zip Code 306 South Montreal Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Table and Gas Reimbursement
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12 of 16	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 03/10/2021	5 Payee name Chad West PLLC	
6 Amount (\$) 31.26	7 Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailchimp Reimbursement
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 03/10/2021	Payee name Liz Miller	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 1201 Bittern Drive Little Elm, TX 75068	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 03/10/2021	Payee name Anthony Jaramillo	
Amount (\$) 190.00	Payee address; City; State; Zip Code 2650 East Melissa Road Suite 621 Little Elm, TX 75454	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 13 of 16		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/10/2021		5 Payee name AAGD			
6 Amount (\$) 1000.00		7 Payee address; City; State; Zip Code 5728 LBJ Freeway Suite Dallas, TX 75240			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Reimbursement		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for donation overage	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/11/2021		Payee name Chad West			
Amount (\$) 1108.79		Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Reimbursement		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for marketing materials	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/11/2021		Payee name Qualigraphics, Inc			
Amount (\$) 1980.73		Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Door Hangers	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 14 of 16		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/11/2021		5 Payee name Qualigraphics, Inc			
6 Amount (\$) 265.12		7 Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Envelopes for Campaign	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/15/2021		Payee name Taylor Adams			
Amount (\$) 2000.00		Payee address; City; State; Zip Code 519 North Oak Cliff Boulevard Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Work	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/18/2021		Payee name Liz Miller			
Amount (\$) 43.30		Payee address; City; State; Zip Code 1201 Bittern Drive Little Elm, TX 75068			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Meals		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer Meal Reimbursement	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 15 of 16		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/18/2021		5 Payee name Benjamin Calhoun			
6 Amount (\$) 190.00		7 Payee address; City; State; Zip Code 2650 East Melissa Road Dallas, TX 75454			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/18/2021		Payee name Darnella Wilson			
Amount (\$) 137.50		Payee address; City; State; Zip Code 9747 Whitehurst Drive Dallas, TX 75243			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/18/2021		Payee name Liz Miller			
Amount (\$) 1000.00		Payee address; City; State; Zip Code 1201 Bittern Drive Little Elm, TX 75068			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 16 of 16		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/19/2021		5 Payee name Nyx Mendoza			
6 Amount (\$) 108.00		7 Payee address; City; State; Zip Code 9633 County Road 800 Royce City, TX 75189			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/19/2021		Payee name Walls Printing			
Amount (\$) 1776.70		Payee address; City; State; Zip Code 9171 King Arthur Dallas, TX 75247			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postcard - mailers	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/19/2021		Payee name Benny Guzman			
Amount (\$) 400.00		Payee address; City; State; Zip Code 306 South Montreal Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED