CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	Filer ID (Ethics Comm	nission Filers)	2 Total pages filed: 53	OFFICE USE ONLY		
3	CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Mr Ter NICKNAME LAST Atki	MI nnell SUFFIX	Date Received		
4	ORIGINAL REPORT TYPE	July 15 Exc X 30th day before election 15t ap	Other (specify) ceeded \$500 limit h day after treasurer pointment (officeholder only) al report	Date Hand-delivered or Date Postmarked Receipt # Amount \$		
5	ORIGINAL PERIOD COVERED	Month Day Year 01 / 01 / 2023 Th	Month Day Year HROUGH 03 / 27 / 2023	Date Processed Date Imaged		
6	EXPLANATION OF CO	RRECTION				
	Correction to Last Day Balance (Line 5, Coversheet 2)					
7	AFFIDAVIT	report is	or affirm, under penalty of perjury, true and correct. ONLY if applicable:	that this corrected		
	Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed					
			de in good faith.	o report as originally mea		
			* * * Electronically Certified	d * * *		
	AFFIX NOTARY STAMP / SEAL ABOVE Signature of Candidate or Officeholder					
		d before me, by the said Mr Tennell A		Oth day of May ,		
	20, to certify	which, withess my hand and seal of offi	ce.			
_	Signature of officer adr	ninistering oath Printer	d name of officer administering oath	Title of officer administering oath		
	Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction C	The C/OH Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers						
3 CANDIDATE/ OFFICEHOLDER	MS / MRS / MR Mr	FIRST Tennell	MI	OFFICE	USE ONLY		
NAME	NICKNAME	LAST Atkins	SUFFIX	Date Received			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1417 Meadow Stone Lane Dallas TX 75232					
Change of Address							
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (469)	PHONE NUMBER 417 8939	EXTENSION	Date Hand-delivered Receipt #	or Date Postmarked Amount \$		
6 CAMPAIGN TREASURER	MS / MRS / MR Ms	FIRST Velma	MI	Date Processed	Amount \$		
NAME	NICKNAME	LAST	SUFFIX	Date 1 100c05cu			
		Milliner		Date Imaged			
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1407 Laura Lane Dallas TX 75241						
(Residence or Business)							
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION						
1110112	(214)	371 7482					
9 REPORT TYPE	January 15	X 30th day before 6	election Runoff	15th day af treasurer a (Officeholde			
	July 15	8th day before ele	ection Exceeded Modified Reporting Limit	Final Repor	t (Attach C/OH - FR)		
10 PERIOD	Month	Day Year	Month	Day Year			
COVERED	01	/ 01 /2023	THROUGH 03	/ 27 / 202	3		
11 ELECTION	Month Day	Year Primary Mary General	Runoff Other Description Special				
12 OFFICE	OFFICE HELD (if any)	,	13 OFFICE SOUGHT (if known Council District 8))			
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITURE	ACCEPTED OR POLITICAL EXPENDITURES M S MAY HAVE BEEN MADE WITHOUT THE CANI IRED TO REPORT THIS INFORMATION ONLY IF T	DIDATE'S OR OFFICEHOL	DER'S KNOWLEDGE OR		
COMMITTEE(G)	COMMITTEE TYPE	COMMITTEE NAME					
Additional Pages	GENERAL	COMMITTEE ADDRESS					
	SPECIFIC	COMMITTEE CAMPAIGN TRE	EASURER NAME				
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS				
		GO ТО	PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Mr Tennell Atkins				16 F	Filer ID (Et	hics Commi	ssion Filers)
17 CONTRIBUTION TOTALS	PLEDGES		L CONTRIBUTIONS (OTH NTEES OF LOANS, OR FRONICALLY)	IER THAN	\$	0.00	
		OLITICAL CONTRIB HAN PLEDGES, LOAN	UTIONS S, OR GUARANTEES OF	LOANS)	\$	15650.00	
EXPENDITURE TOTALS	3. TOTAL UN	IITEMIZED POLITICAL	. EXPENDITURE.		\$	0.00	
	4. TOTAL PO	OLITICAL EXPENDI	TURES		\$	25757.18	
CONTRIBUTION BALANCE		LITICAL CONTRIBUTI RTING PERIOD	ONS MAINTAINED AS OF	THE LAST DA	Y \$	31178.39	
OUTSTANDING LOAN TOTALS		INCIPAL AMOUNT OF OF THE REPORTING	ALL OUTSTANDING LOA	ANS AS OF THE		0.00	
	wear, or affirm, under uired to be reported by		at the accompanying rep	port is true and	correct a	nd includes	all information
ELECTRONICALLY CERTIFIED							
			Signati	ure of Candida	ite or Offic	ceholder	
		Please compl	ete either option	below:			
(1) Affidavit							
NOTARY STAMP/SEAI	_						
		Tennell Atkins		19th		. May	S.
Sworn to and subscribed				this the 17th	day	of	<u>y</u>
$20 \phantom{0000000000000000000000000000000000$	which, witness my hand	d and seal of office.					
Signature of officer administe	ring oath	Printed name of office	er administering oath		Title o	f officer adn	ministering oath
			OR				
(2) Unsworn Declaration	on						
My name is			, and my date	of birth is			
My address is				,	.,	,	
	(street)	(city)		٠.	, ,	country)
Executed in	County, Stat	te of	_ , on the day o	(month)	, 20	year)	
			Signature	of Candidate/C	Officeholde	r (Declarar	nt)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	Mr Tennell Atkins 20 Filer ID (Ethics Comments of the Comment						
21	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE						
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTION	\$ 15,650.00					
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL (\$ 0.00					
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00				
4.	. SCHEDULE E: LOANS		\$ 0.00				
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FR	ROM POLITICAL CONTRIBUTIONS	\$ 25,757.18				
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00				
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE	FROM POLITICAL CONTRIBUTIONS	\$ 0.00				
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CA	ARD	\$ 0.00				
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FRO	OM PERSONAL FUNDS	\$ 0.00				
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CON	NTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FI	ROM POLITICAL CONTRIBUTIONS	\$ 0.00				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS TO FILER	S, AND CONTRIBUTIONS RETURNED	\$ 0.00				

SCHEDULE A1

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

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 1 of 9
2 FILER NAME Mr Tennell Atkir	S		3 Filer ID (Ethics Commission Filers)
4 Date 03/07/2023	Jeannette Watts 6 Contributor address; City;	State; Zip Code	7 Amount of contribution (\$) 50.00
8 Principal occu		TX 75241 9 Employer (See Instruction	ons)
Date 02/17/2023	Full name of contributor	State; Zip Code	Amount of contribution (\$) 200.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 02/20/2023	Mrs Pat Schenkel Contributor address: City:	State; Zip Code TX 75208	Amount of contribution (\$) 1000.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 02/25/2023	Full name of contributor ☐ out-of-state PAC Hiawatha Williams	(ID#:)	Amount of contribution (\$) 1000.00
	Contributor address; City; 1014 Clifton Lane Desoto,	State; Zip Code , TX 75115	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

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

	Instruction Guide explains how to	o complete this	form.	1 Total pages Schedule A1: 2 of 9
2 FILER NAME Mr Tennell Atki				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	; (ID#:)	7 Amount of contribution (\$)
02/20/2023	Craig Schenkel			500.00
	6 Contributor address; 3106 Stanford Ave	City; Dallas,	State; Zip Code TX 75225	
8 Principal occu	 pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	; (ID#:)	Amount of contribution (\$)
02/20/2023	Joan Walne			250.00
	Contributor address; 10020 Caribou Trail	City;	State; Zip Code TX 75238	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date		out-of-state PAC	; (ID#:)	Amount of contribution (\$)
02/17/2023	John Volney			250.00
	Contributor address; 7047 Westlake Ave	City; Dallas,	State; Zip Code TX 75214	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date 03/10/2023	Full name of contributor The Preo Group, LLC	out-of-state PAC	C (ID#:)	Amount of contribution (\$) 500.00
	Contributor address; 3503 Viburnum Drive	City; Wylie,	State: Zip Code TX 75098	
	pation / Job title (See Instructions)		Employer (See Instruct	tions)

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SCHEDULE A1

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

Instruction Guide explains how	1 Total pages Schedule A1: 3 of 9		
	3 Filer ID (Ethics Commission Filers)		
ns			
5 Full name of contributor	C (ID#:)	7 Amount of contribution (\$)	
Access Buckner LTD		1000.00	
6 Contributor address; 3404 N I-35 Suite E			
pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
Marian Brown for Sheriff			200.00
		State; Zip Code	
pation / Job title (See Instructions)		Employer (See Instruct	tions)
Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
William Tsao		1000.00	
Contributor address; 6922 Aspen Creek Ln	City;	State; Zip Code , TX 75202	
pation / Job title (See Instructions)		Employer (See Instruct	tions)
Full name of contributor Kai Ray Chung	out-of-state PAC	C (ID#:)	Amount of contribution (\$) 500.00
Contributor address; 2308 Morning Glory Dr	City; State: Zip Code Richardson, TX 75082		
Principal occupation / Job title (See Instructions)		Employer (See Instruct	tions)
	5 Full name of contributor Access Buckner LTD 6 Contributor address; 3404 N I-35 Suite E spation / Job title (See Instructions) Full name of contributor Marian Brown for Sheriff Contributor address; P.O. Box 851635 pation / Job title (See Instructions) Full name of contributor William Tsao Contributor address; 6922 Aspen Creek Ln pation / Job title (See Instructions) Full name of contributor Kai Ray Chung Contributor address; 2308 Morning Glory Dr	5 Full name of contributor Access Buckner LTD 6 Contributor address; 3404 N I-35 Suite E Inpation / Job title (See Instructions) Full name of contributor Marian Brown for Sheriff Contributor address; P.O. Box 851635 Full name of contributor William Tsao Contributor address; 6922 Aspen Creek Ln Full name of contributor William Tsao Contributor address; 6922 Aspen Creek Ln Full name of contributor Contributor address; 6922 Aspen Creek Ln Full name of contributor Contributor address; City; Cit	S

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SCHEDULE A1

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

The	Instruction Guide explains how	to complete this	s form.	1 Total pages Schedule A1: 4 of 9
2 FILER NAME Mr Tennell Atkin	ns			3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor □ out-of-state PAC (ID#:□ Dr Charles Ku 6 Contributor address; City; State; Zip Code 148 Red Oak Ln Flower Mound, TX 75028				7 Amount of contribution (\$) 500.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date 03/14/2023	Full name of contributor Shihhsiu Chen Contributor address; 1508 Adams Dr	City;	State; Zip Code	Amount of contribution (\$) 300.00
Principal occup	 pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 03/01/2023	Full name of contributor Chun Huang Contributor address; 6178 Prestondell Dr	City:	State; Zip Code, TX 75240	Amount of contribution (\$) 200.00
Principal occup	 pation / Job title (See Instructions)		Employer (See Instruc	itions)
Date 03/14/2023	Full name of contributor Eric Ko Contributor address: 5916 Crownover Court	out-of-state PAC	State: Zip Code	Amount of contribution (\$) 200.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)

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SCHEDULE A1

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

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 5 of 9
2 FILER NAME Mr Tennell Atkin	ıs			3 Filer ID (Ethics Commission Filers)
4 Date 03/14/2023	Full name of contributor Kathy Lin	C (ID#:)	7 Amount of contribution (\$) 200.00	
	6 Contributor address; 6515 Virginia Square			
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date Full name of contributor O3/14/2023 helen lee Contributor address; City;		State; Zip Code	Amount of contribution (\$) 200.00	
	1417 chesterton dr	•	Ison, TX 75080	
Principal occupation / Job title (See Instructions)			Employer (See Instruc	tions)
Date 03/14/2023	Full name of contributor Tina Higley	out-of-state PAC	(ID#:)	Amount of contribution (\$) 100.00
	Contributor address; 1701 Arena Dr	City; Plano,	State; Zip Code TX 75025	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 03/14/2023	Full name of contributor Anna Chu	out-of-state PAC	C (ID#:)	Amount of contribution (\$) 100.00
	Contributor address; 5201 Mariners Dr	City; Plano, TX 75093		
Principal occupation / Job title (See Instructions)			Employer (See Instruc	tions)
				

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SCHEDULE A1

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

The	Instruction Guide explains how to comp	lete this form.	1 Total pages Schedule A1: 6 of 9	
2 FILER NAME Mr Tennell Atkin	S		3 Filer ID (Ethics Commission Filers)	
4 Date 03/02/2023	5 Full name of contributor ☐ out-of Arnold Gachman 6 Contributor address; City; 1229 Shady Oaks Lane	7 Amount of contribution (\$) 250.00		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)	
Date 03/01/2023	Full name of contributor out-of Neil Goldberg Contributor address; City: 5530 Palomar Lane		Amount of contribution (\$) 1000.00	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	itions)	
Date 03/17/2023	Full name of contributor	-state PAC (ID#:) State; Zip Code Dallas, TX 75203	Amount of contribution (\$) 500.00	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	ctions)	
Date Full name of contributor out-of-state PAG 03/24/2023 Brian Dennison		-state PAC (ID#:)	Amount of contribution (\$) 500.00	
	Contributor address; City; 1303 Woodlawn Ave	State: Zip Code Dallas, TX 75208		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	l otions)	

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SCHEDULE A1

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

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 7 of 9
2 FILER NAME Mr Tennell Atkin	ns			3 Filer ID (Ethics Commission Filers)
4 Date 02/17/2023	 5 Full name of contributor Ronald Steinhart 6 Contributor address; 25 Robledo Dr 	City;	State; Zip Code , TX 75230	7 Amount of contribution (\$) 500.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	etions)
Date 02/16/2023	Full name of contributor Elizabeth Trout Contributor address; 5005 Willowood St	City;	State; Zip Code TX 75205	Amount of contribution (\$) 1000.00
Principal occup	ation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 02/15/2023	Full name of contributor Deedie Rose Contributor address; 5 Willowood St	City:	State; Zip Code TX 75205	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 01/26/2023	Full name of contributor Vg Brooks Contributor address; P.O. Box 1400092	out-of-state PAC	C (ID#:) State; Zip Code TX 75014	Amount of contribution (\$) 250.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)

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SCHEDULE A1

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

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 8 of 9
2 FILER NAME Mr Tennell Atkir	18			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
03/20/2023	DeMetris Sampson	_		500.00
	6 Contributor address; P.O. Box 763834	City; Dallas,	State; Zip Code TX 75376-3834	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
02/28/2023	Olive Talley			50.00
	Contributor address; 6133 Prospect Ave	City;	State; Zip Code TX 75218	
Principal occup	aation / Job title (See Instructions)		Employer (See Instruct	iions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
02/22/2023	Matthew Houston			250.00
	Contributor address; 1504 Boca Chica Drive	City; Dallas,	State; Zip Code TX 75232	
Principal occup	 pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date 02/21/2023	Full name of contributor Courtney Spellicy	out-of-state PAC	C (ID#:)	Amount of contribution (\$) 100.00
	Contributor address; 7117 Wake Forest Drive	City; Dallas,	State: Zip Code TX 75214	
Principal occupation / Job title (See Instructions)			Employer (See Instruct	tions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

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

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 9 of 9
2 FILER NAME Mr Tennell Atkir	S		3 Filer ID (Ethics Commission Filers)
4 Date 01/12/2023	MRR & Associates LLC 6 Contributor address; City;	(ID#:) State; Zip Code TX 75201	7 Amount of contribution (\$) 500.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date 02/27/2023	Lucy Billingsley Contributor address; City;	State; Zip Code TX 75201	Amount of contribution (\$)
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:) State; Zip Code	Amount of contribution (\$)
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	tions)
	4 TT 4 QUI 4 D D ITIQUI 4 1 Q Q D ITQ 6	SE TIME COMEDINE A CAN	FEDED

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 1 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date 01/30/2023	5 Payee name The Order Desk			
6 Amount (\$) 385.00	7 Payee address; 9840 Monroe Dr Suite 1024allas, TX 75220	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description supplies		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
02/13/2023	The Order Desk			
Amount (\$) 155.00	Payee address; 9840 Monroe Dr Suite 1@Pallas, TX 75220	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 01/30/2023	Payee name The Order Desk			
Amount (\$) 530.89	Payee address; 9840 Monroe Dr Suite 104 allas, TX 75220	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description postage		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 2 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 02/13/2023	5 Payee name The Order Desk			
6 Amount (\$) 89.53	7 Payee address; 9840 Monroe Dr Suite 140 allas, TX 75220	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description postage		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 02/14/2023	Payee name Alligator Jacks			
Amount (\$) 40.00	Payee address; 5310 S Lamar Dallas, TX 75215	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Comm	Donation		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 01/05/2023	Payee name Gonzalez Restaurant			
Amount (\$) 30.98	Payee address; 367 Jefferson Blvd Dallas, TX 75208	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 3 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/09/2023	5 Payee name Lubys Store 0221		
6 Amount (\$) 56.87	7 Payee address; 5600 S Hampton Rd Dallas, TX 75232	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 01/09/2023	Payee name Campis		
Amount (\$) 44.62	Payee address; 1520 Elm St Suite 111 Dallas, TX 75201	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/06/2023	Payee name Campis		
Amount (\$) 47.54	Payee address; 1520 Elm St Suite 111 Dallas, TX 75201	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 4 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 02/21/2023	5 Payee name Campis			
6 Amount (\$) 33.85	7 Payee address; 5600 Elm St Suite 111 Dallas, TX 75201	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
01/17/2023	Lisa Soul Food Cafe			
Amount (\$) 58.44	Payee address; 2550 W Redbird Ln Suit D404s, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 01/23/2023	Payee name Popeyes #7391			
Amount (\$) 38.92	Payee address; 8181 S. Lancaster Rd Dallas, TX 75241	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 5 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethic	s Commission Filers)
4 Date 01/30/2023	5 Payee name Nothing Bundt			
6 Amount (\$) 30.00	7 Payee address; 352 N Hwy 67 Suite B Cedar Hill, TX 75104	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
02/06/2023	Ojeda Family Restaurant			
Amount (\$) 63.81	Payee address; 2109 S Hampton Rd Desoto, TX 75115	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 02/07/2023	Payee name Golden Chick			
Amount (\$) 38.41	Payee address; 3789 W Camp Wisdom Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 6 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 02/12/2023	5 Payee name Pancake House			
6 Amount (\$) 65.12	7 Payee address; 2900 Lemmon Ave SuiteD 200 as, TX 75204	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
02/14/2023	Cheddars			
Amount (\$) 66.12	Payee address; 39640 LBJ Frwy Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 02/15/2023	Payee name Capital Grill			
Amount (\$) 61.96	Payee address; 500 Crescent Ct Dallas, TX 75201	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 7 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 02/18/2023	5 Payee name Baby Back Shack			
6 Amount (\$) 33.12	7 Payee address; 1800 Akard Dallas, TX 75215	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
02/21/2023	Olive Garden			
Amount (\$) 88.06	Payee address; 639 S Cockrell Hill Duncanville, TX 75116	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/03/2023	Payee name The Island Spot			
Amount (\$) 25.88	Payee address; 309 W Jefferson Blvd Dallas, TX 75208	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 8 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Co	mmission Filers)
4 Date 03/09/2023	5 Payee name Chick fil A			
6 Amount (\$) 48.37	7 Payee address; 387 E FM 1382 Suite 75 Cedar Hill, TX 75104	City;	State; Z	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expe	ense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Offi	ce held
Date	Payee name			
03/12/2023	Spring Creek BBQ			
Amount (\$) 39.94	Payee address; 2827 W Wheatland Dallas, TX 75237	City;	State; Z	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expe	ense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Offi	ce held
Date 03/18/2023	Payee name Chubbys			
Amount (\$) 34.82	Payee address; 7474 S Cockrell Hill Dallas, TX 75236	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expe	ense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Off	îce held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

oreal card aymen	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 9 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/03/2023	5 Payee name Sams Club		
6 Amount (\$) 46.77	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 01/09/2023	Payee name Sams Club		
Amount (\$) 43.67	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 01/09/2023	Payee name Sams Club		
Amount (\$) 45.61	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

oreal card aymen	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 10 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/09/2023	5 Payee name Sams Club		
6 Amount (\$) 22.55	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
01/17/2023	Sams Club		
Amount (\$) 54.29	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 01/17/2023	Payee name Sams Club		
Amount (\$) 100.00	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 11 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 01/23/2023	5 Payee name Sams Club			
6 Amount (\$) 53.74	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 01/30/2023	Payee name Sams Club			
Amount (\$) 21.21	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 01/30/2023	Payee name Sams Club			
Amount (\$) 100.00	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 12 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 02/07/2023	5 Payee name Sams Club		
6 Amount (\$) 55.78	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/13/2023	Payee name Sams Club		
Amount (\$) 33.38	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/13/2023	Payee name Sams Club		
Amount (\$) 53.35	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Travel In District
Travel Out Of District
Other (enter a category not listed above)

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 13 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 02/21/2023	5 Payee name Sams Club		
6 Amount (\$) 56.03	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
02/21/2023	Sams Club		
Amount (\$) 23.26	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/21/2023	Payee name Sams Club		
Amount (\$) 39.31	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 14 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 02/17/2023	5 Payee name Shell			
6 Amount (\$) 33.99	7 Payee address; 7027 S RL Thornton Dallas, TX 75232	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/05/2023	Payee name Shell			
Amount (\$) 40.01	Payee address; 7027 S RL Thornton Dallas, TX 75232	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/10/2023	Payee name Shell			
Amount (\$) 30.01	Payee address; 7027 S RL Thornton Dallas, TX 75232	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	·

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 15 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 01/01/2023	5 Payee name Sams Club			
6 Amount (\$) 40.76	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 01/01/2023	Payee name Sams Club			
Amount (\$) 37.51	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 02/27/2023	Payee name Sams Club			
Amount (\$) 54.02	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	·

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Travel In District
Travel Out Of District
Other (enter a category not listed above

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Candidate/Officeholder/Politica Credit Card Payment	3	Wages/Contract Labor	Other (enter a category not listed above)
	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 16 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/03/2023	5 Payee name Sams Club		
6 Amount (\$) 54.95	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/06/2023	Sams Club		
Amount (\$) 40.19	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/09/2023	Payee name Sams Club		
Amount (\$) 50.74	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 17 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 03/13/2023	5 Payee name Sams Club			
6 Amount (\$) 54.00	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8		
Date 03/14/2023	Payee name Sams Club			
Amount (\$) 40.51	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date 03/14/2023	Payee name Sams Club			
Amount (\$) 31.17	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 18 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 03/20/2023	5 Payee name Sams Club			
6 Amount (\$) 56.54	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/20/2023	Payee name Sams Club			
Amount (\$) 46.67	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/20/2023	Payee name Sams Club			
Amount (\$) 49.89	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Travel In District
Travel Out Of District
Other (enter a category not listed above)

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 19 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/24/2023	5 Payee name Sams Club		
6 Amount (\$) 38.77	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/25/2023	Payee name Sams Club		
Amount (\$) 55.42	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/27/2023	Payee name Sams Club		
Amount (\$) 47.74	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THI	S SCHEDULE AS NEI	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
Total pages Schedule F1: 20 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/27/2023	5 Payee name Sams Club		
6 Amount (\$) 15.87	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/27/2023	Payee name Sams Club		
Amount (\$) 10.91	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/27/2023	Payee name Sams Club		
Amount (\$) 58.11	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description	
	Check if travel outside of Texas. Complete Schedule T.		n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 21 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/01/2023	5 Payee name AT&T		
6 Amount (\$) 451.62	7 Payee address; P.O. Box 6811 Dallas, TX 75225	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description phone	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/01/2023	Payee name AT&T		
Amount (\$) 413.75	Payee address; P.O. Box 6811 Dallas, TX 75225	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	phone	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/01/2023	Payee name AT&T		
Amount (\$) 414.47	Payee address; P.O. Box 6811 Dallas, TX 75225	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description phone	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THI	S SCHEDULE AS NEI	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 22 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethic	s Commission Filers)
4 Date 02/06/2023	5 Payee name US Postal Office			
6 Amount (\$) 1890.00	7 Payee address; 3107 W Camp Wisdom Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description postage		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
02/16/2023	US Postal Office			
Amount (\$) 63.00	Payee address; 3107 W Camp Wisdom Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	postage		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/06/2023	Payee name US Postal Office			
Amount (\$) 194.00	Payee address; 3107 W Camp Wisdom Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description postage		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 23 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics C	ommission Filers)
4 Date 02/17/2023	5 Payee name US Postal Office			
6 Amount (\$) 63.00	7 Payee address; 3107 W Camp Wisdom Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description postage		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living ex	pense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Of	fice held
Date	Payee name			
02/06/2023	HOME DEPOT			
Amount (\$) 144.28	Payee address; 2901 W WHEATLAND Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living ex	pense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Of	fice held
Date 02/16/2023	Payee name Home Depot			
Amount (\$) 101.73	Payee address; 29001 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living exp	pense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	0	ffice held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 24 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date 03/14/2023	5 Payee name HOME DEPOT			
6 Amount (\$) 23.87	7 Payee address; 2901 W WHEATLAND Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description supplies		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
02/13/2023	The Order Desk			
Amount (\$) 257.32	Payee address; 9840 Monroe Dr Suite 1024allas, TX 75220	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	postage		
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 01/30/2023	Payee name The Order Desk			
Amount (\$) 947.65	Payee address; 9840 Monroe Dr Suite 104 allas, TX 75220	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description postage		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 25 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/27/2023	5 Payee name Reilly Echols Printing Inc		
6 Amount (\$) 1160.98	7 Payee address; 1710 S Hardwood Dallas, TX 75201	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description printing	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/06/2023	Payee name Reilly Echols Printing Inc		
Amount (\$) 478.76	Payee address; 1710 S Hardwood Dallas, TX 75201	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Printing Expense	printing	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/19/2023	Payee name MMS Company Add Specialities		
Amount (\$) 2500.00	Payee address; 217 N I-35 Dessoto, TX 75115	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description yard signs	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 26 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/14/2023	5 Payee name Ojeda Family Restaurant		
6 Amount (\$) 61.06	7 Payee address; 2109 S Hampton Rd Desoto, TX 75115	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/06/2023	Payee name Popeyes #7391		
Amount (\$) 31.76	Payee address; 2972 W Wheatland Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/08/2023	Payee name Red Lobster		
Amount (\$) 200.31	Payee address; 603 N Cockrell Hill Dallas, TX 75232	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Ordan Oard Faymon	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 27 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/16/2023	5 Payee name Pappadeux		
6 Amount (\$) 108.76	7 Payee address; 800 E Hwy 67 Duncanville, TX 75237	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
01/23/2023	Popeyes #7391		
Amount (\$) 38.92	Payee address; 2972 W Wheatland Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/20/2023	Payee name Chick Fil A		
Amount (\$) 22.98	Payee address; 2429 W Wheatland Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 28 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 03/06/2023	5 Payee name Campis			
6 Amount (\$) 88.02	7 Payee address; 1520 Elm St Suite 111 Dallas, TX 75201	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
03/17/2023	Campis			
Amount (\$) 129.61	Payee address; 1520 Elm St Suite 111 Dallas, TX 75201	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/20/2023	Payee name Chilis			
Amount (\$) 69.19	Payee address; 2503 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 29 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 03/13/2023	5 Payee name Chilis			
6 Amount (\$) 68.16	7 Payee address; 2503 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
01/01/2023	Jefferson Monument			
Amount (\$) 350.00	Payee address; 1350 Manufacturing Dallas, TX 75207	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Rent		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 02/01/2023	Payee name Jefferson Monument			
Amount (\$) 350.00	Payee address; 1350 Manufacturing Dallas, TX 75207	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description rent		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 30 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/01/2023	5 Payee name Jefferson Monument		
6 Amount (\$) 350.00	7 Payee address; 1350 Manufacturing Dallas, TX 75207	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Rent	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/04/2023	Payee name James & Iashun Virden		
Amount (\$) 120.00	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	salary	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/05/2023	Payee name James & Iashun Virden		
Amount (\$) 120.00	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description salary	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)	
Total pages Schedule F1: 31 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filer	s)
4 Date 03/06/2023	5 Payee name James & Iashun Virden	'		
6 Amount (\$) 300.00	7 Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description salary		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date 03/11/2023	Payee name James & Iashun Virden			
Amount (\$) 180.00	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description salary		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date 03/12/2023	Payee name James & Iashun Virden			
Amount (\$) 150.00	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description salary		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 32 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 03/13/2023	5 Payee name James & Iashun Virden			
6 Amount (\$) 240.00	7 Payee address; 3425 Hacienda Dallas, TX 75233	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description salary		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/18/2023	Payee name James & Iashun Virden			
Amount (\$) 210.00	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	salary		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/19/2023	Payee name James & Iashun Virden			
Amount (\$) 180.00	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description salary		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 33 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/20/2023	5 Payee name James & Iashun Virden		
6 Amount (\$) 450.00	7 Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description salary	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/24/2023	Payee name James & Iashun Virden		
Amount (\$) 360.00	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	salary	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/25/2023	Payee name James & Iashun Virden		
Amount (\$) 210.00	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description salary	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 34 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 03/26/2023	5 Payee name James & Iashun Virden			
6 Amount (\$) 180.00	7 Payee address; 3425 Hacienda Dallas, TX 75233	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description salary		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/27/2023	Payee name James & Iashun Virden			
Amount (\$) 300.00	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	salary		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 02/17/2023	Payee name Gail Turner			
Amount (\$) 210.00	Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description phone bank		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

oreal card aymen	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 35 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/03/2023	5 Payee name Gail Turner		
6 Amount (\$) 110.00	7 Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description phone bank	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/09/2023	Payee name Gail Turner		
Amount (\$) 120.00	Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/15/2023	Payee name Gail Turner		
Amount (\$) 130.00	Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 36 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/07/2023	5 Payee name Gail Turner		
6 Amount (\$) 90.00	7 Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description phone bank	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/20/2023	Payee name Gail Turner		
Amount (\$) 150.00	Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/13/2023	Payee name Gail Turner		
Amount (\$) 120.00	Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 37 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 02/10/2023	5 Payee name Gail Turner		
6 Amount (\$) 85.00	7 Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description phone bank	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/22/2023	Payee name Judy Williams		
Amount (\$) 100.00	Payee address; 409 Lou Street Duncanville, TX 75137	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/27/2023	Payee name Judy Williams		
Amount (\$) 90.00	Payee address; 409 Lou Street Duncanville, TX 75137	City;	State; Zip Code
PURPOSE OF	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description phone bank	
EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.	Charle if Access	n TV officeholder living everage
Complete ONLY if direct	Candidate / Officeholder name	Office sought	n, TX, officeholder living expense Office held
Complete ONLY if direct expenditure to benefit C/OH		Council District 8	Office field
	ATTACH ADDITIONAL COPIES OF THE	S SCHEDULE AS NE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 38 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/11/2023	5 Payee name Judy Williams		
6 Amount (\$) 70.00	7 Payee address; 409 Lou Street Duncanville, TX 75137	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description phone bank	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/20/2023	Payee name Judy Williams		
Amount (\$) 90.00	Payee address; 409 Lou Street Duncanville, TX 75137	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 02/01/2023	Payee name Big Bang		
Amount (\$) 970.00	Payee address; 103 N. W. 14th St Grand Prairie, TX 75050	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description door hangers	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

•	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 39 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date 02/02/2023	5 Payee name Big Bang			
6 Amount (\$) 450.00	7 Payee address; 103 N. W. 14th St Grand Prairie, TX 75050	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Printing Expense	door hangers		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living e	xpense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	C	Office held
Date	Payee name			
03/07/2023	M&M Advertising			
Amount (\$) 1200.00	Payee address; P.O. Box 1418 Desoto, TX 75123	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Advertising		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living e	xpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	C	ffice held
Date 03/07/2023	Payee name M&M Advertising			
Amount (\$) 450.00	Payee address; P.O. Box 1418 Desoto, TX 75123	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Advertising		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living e	xpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	(Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outes (ornor a satego	.,
1 Total pages Schedule F1: 40 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date 02/15/2023	5 Payee name Beyond The Slogam			
6 Amount (\$) 500.00	7 Payee address; 2710 Routh Creek Suite Rk20ardson, TX 75061	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description consultant		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 01/07/2023	Payee name Texas Democratic Party			
Amount (\$) 605.00	Payee address; P.O. Box 15707 Austin, TX 78761	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description data base		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 01/17/2023	Payee name Elite News			
Amount (\$) 1000.00	Payee address; P.O. Box 380071 Dallas, TX 75183	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description advertising		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 41 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/20/2023	5 Payee name ECO Latino		
6 Amount (\$) 500.00	7 Payee address; 2320 W Davis Dallas, TX 75208	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description advertising	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
02/15/2023	Terri Hodge		
Amount (\$) 1000.00	Payee address; 7106 Abrams Rd Dallas, TX 75231	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Consulting Expense	consultant	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

Supplement Officeholder	al Report			FOR Cover She	SMSR etSR
1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST Tennell	МІ	2. Total Pages Filed: 51	
	NICKNAME	LAST Atkins	SUFFIX	3. Office Held	
4. SUPPLEMENTAL REPORT TYPE	c January 15	💢 30th day befo	ore election c Runoff	c 15th day after camp treasurer appointme (officeholder only)	
	c July 15	c 8th day befor	e election	00 c Final Report	
5. PERIOD / COVERED	1/1/2023 THROUGH 3/27/2023				
6. ELECTION	Month Day Year				
		c Primary	c Runoff	X General c Spe	ecial 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 LO		F LOANS)	\$ 0.00	
	EXPENDITURE	3. TOTAL OFFICEHO	LDER EXPENDITURES OF \$100 C	OR LESS, UNLESS ITEMIZED	\$0.00
	TOTALS	4. TOTAL OFFICEHO	LDER EXPENDITURES		\$ 0.00
8. POLITICAL	CONTRIBUTION TOTALS	LOANS, OR GUARAN	CONTRIBUTIONS OF \$50 OR LE TEES OF LOANS), UNLESS ITEM		\$ 0.00
(Campaign)		6. TOTAL POLITICAL (OTHER THAN PLED)	CONTRIBUTIONS GES, LOANS, OR GUARANTEES C	DF LOANS)	\$ 15,650.00
	EXPENDITURE	7. TOTAL POLITICAL	EXPENDITURES OF \$100 OR LE	SS UNLESS ITEMIZED	\$ 0.00
	TOTALS	8. TOTAL POLITICAL	EXPENDITURES		\$25,757.18
9. OFFICEHOLDER FUN FOR CAMPAIGN PURI			MOUNT OF OFFICEHOLDER CONTURES DURING THE REPORTING		\$0.00
10. AFFIDAVIT		is true ar	or affirm, under penalty of paid correct and includes all in Title 15, Election code.		
ELECTRONICALLY CERTIFIED					
AFFIX NOTARY STAN	/IP / SEAL ABOVE		Signature of Candidate	e or Officeholder	
Sworn to and subscribed b	pefore me, by the said Mr To	ennell Atkins		, this the 19th	day
of <u>May</u> , 20	0_23 , to certify which,	witness my hand and	I seal of office.		
Signature of officer ad	ministering oath	Printed name of office	r administering oath	Title of officer ad	ministering oath

SCHEDULE A1

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

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 1 of 9
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkin	ns		
4 Date	5 Full name of contributor out-of-state_PAC	(ID#:)	7 Amount of contribution (\$)
03/07/2023	Jeannette Watts		50.00
Campaign Contribution	6 Contributor address; City; 7132 Nandina Dr Dallas,	State; Zip Code TX 75241	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/17/2023	R Steve Folsom		200.00
Campaign Contribution	Contributor address; City;	State; Zip Code TX 75001	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/20/2023	Mrs Pat Schenkel		1000.00
Campaign Contribution	Contributor address: Citv:	State; Zip Code TX 75208	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 02/25/2023	Full name of contributor out-of-state PAC Hiawatha Williams	(ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; City; 1014 Clifton Lane Desoto	State: Zip Code , TX 75115	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

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

ine	Instruction Guide explains how to complete this for	m. 1 Total pages Schedule A1: 2 of 9
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkin	18	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
02/20/2023	Craig Schenkel	500.00
Campaign Contribution	6 Contributor address; City; S 3106 Stanford Ave Dallas, TX	tate; Zip Code 75225
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
02/20/2023	Joan Walne	250.00
Campaign Contribution	Contributor address; City; S 10020 Caribou Trail Dallas, TX	tate; Zip Code 75238
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
02/17/2023	John Volney	250.00
Campaign Contribution	Contributor address; City; St 7047 Westlake Ave Dallas, TX	tate; Zip Code 75214
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
Date 03/10/2023	Full name of contributor	Amount of contribution (\$) 500.00
Campaign	Contributor address; City; S 3503 Viburnum Drive Wylie, TX	tate: Zip Code 75098
Contribution		

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SCHEDULE A1

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

The	Instruction Guide explains how to comp	plete this form.	1 Total pages Schedule A1: 3 of 9
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atki	ns		
4 Date	5 Full name of contributor out-o	of-state PAC (ID#:)	7 Amount of contribution (\$)
02/28/2023	Access Buckner LTD		1000.00
Campaign Contribution	6 Contributor address; City 3404 N I-35 Suite E	Zip Code Lancaster, TX 75134	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	ctions)
Date	Full name of contributor	of-state PAC (ID#:)	Amount of contribution (\$)
03/04/2023	Marian Brown for Sheriff		200.00
Campaign Contribution	Contributor address; City P.O. Box 851635		
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	ctions)
Date	Full name of contributor	of-state PAC (ID#:)	Amount of contribution (\$)
03/14/2023	William Tsao		1000.00
Campaign Contribution	Contributor address; City 6922 Aspen Creek Ln	, State; Zip Code Dallas, TX 75202	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	ltions)
Date 02/14/2023	Full name of contributor □ out-o	of-state PAC (ID#:)	Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; City 2308 Morning Glory Dr	State: Zip Code Richardson, TX 75082	
Principal occu	ation / Job title (See Instructions)	Employer (See Instruc	stions)

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SCHEDULE A1

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

The	Instruction Guide explains how to comple	ete this form.	1 Total pages Schedule A1: 4 of 9
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atki	ns		
4 Date	5 Full name of contributor out-of-s	state PAC (ID#:)	7 Amount of contribution (\$)
03/14/2023	Dr Charles Ku		500.00
Campaign Contribution	6 Contributor address; City; 148 Red Oak Ln	State; Zip Code Flower Mound, TX 75028	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	ctions)
Date	Full name of contributor	state PAC (ID#:)	Amount of contribution (\$)
03/14/2023	Shihhsiu Chen		300.00
Campaign Contribution	Contributor address; City;		
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	itions)
Date	Full name of contributor out-of-s	state PAC (ID#:)	Amount of contribution (\$)
03/01/2023	Chun Huang		200.00
Campaign Contribution	Contributor address; City; 6178 Prestondell Dr	State; Zip Code Dallas, TX 75240	
Principal occu	 pation / Job title (See Instructions)	Employer (See Instruc	l otions)
Date 03/14/2023	Full name of contributor out-of-s	state PAC (ID#:)	Amount of contribution (\$) 200.00
Campaign Contribution	Contributor address; City; 5916 Crownover Court	Plano, TX 75093	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	l tions)

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SCHEDULE A1

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

The	Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1: 5 of 9
2 FILER NAME Mr Tennell Atkin	is		3 Filer ID (Ethics Commission Filers)
4 Date 03/14/2023 Campaign Contribution	Kathy Lin 6 Contributor address; City; 6515 Virginia Square Arli	State; Zip Code ington, TX 76017	7 Amount of contribution (\$) 200.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date 03/14/2023 Campaign Contribution	helen lee Contributor address; City;	State; Zip Code nardson, TX 75080	Amount of contribution (\$) 200.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	tions)
Date 03/14/2023 Campaign Contribution	Tina Higley	PAC (ID#:) State; Zip Code no, TX 75025	Amount of contribution (\$) 100.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)
Date 03/14/2023 Campaign Contribution	Full name of contributor out-of-state Anna Chu Contributor address; City; 5201 Mariners Dr Plan	PAC (ID#:) State: Zip Code no, TX 75093	Amount of contribution (\$) 100.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)

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SCHEDULE A1

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

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 6 of 9
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atki	ns		
4 Date	5 Full name of contributor ☐ out-of-state PAC (I	D#:)	7 Amount of contribution (\$)
03/02/2023	Arnold Gachman		250.00
Campaign Contribution	6 Contributor address; City; 1229 Shady Oaks Lane Fort Wor	State; Zip Code rth, TX 76107	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/01/2023	Neil Goldberg		1000.00
Campaign Contribution	Contributor address; City; 5530 Palomar Lane Dallas, T	State; Zip Code	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/17/2023	Royce West Campaign Committee		500.00
Campaign Contribution	Contributor address; City; 330 S R L Thornton Frwy Suite 220 Dallas, T	State; Zip Code IX 75203	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 03/24/2023	Full name of contributor	D#:)	Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; City; 1303 Woodlawn Ave Dallas, T	State: Zip Code X 75208	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

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

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 7 of 9
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkin	ns		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
02/17/2023	Ronald Steinhart		500.00
Campaign Contribution	6 Contributor address; City; 25 Robledo Dr Dallas,	State; Zip Code TX 75230	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/16/2023	Elizabeth Trout		1000.00
Campaign Contribution	Contributor address; City; 5005 Willowood St Dallas,	State; Zip Code TX 75205	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	iions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/15/2023	Deedie Rose		1000.00
Campaign Contribution	Contributor address; City; 5 Willowood St Dallas,	State; Zip Code TX 75205	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)
Date 01/26/2023	Vg Brooks	(ID#:)	Amount of contribution (\$) 250.00
Campaign Contribution	Contributor address; City; P.O. Box 1400092 Irving,	State: Zip Code TX 75014	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)

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SCHEDULE A1

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

The	Instruction Guide explains how to compl	ete this form. 1 Total pages Schedule A1 8 of 9	:
2 FILER NAME		3 Filer ID (Ethics Commiss	sion Filers)
Mr Tennell Atkin	ns		
4 Date	5 Full name of contributor out-of-	-state PAC (ID#:) 7 Amount of contribution	(\$)
03/20/2023	DeMetris Sampson	500.00	
Campaign Contribution	6 Contributor address; City; P.O. Box 763834	State; Zip Code Dallas, TX 75376-3834	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
Date	Full name of contributor	-state PAC (ID#:) Amount of contribution	(\$)
02/28/2023	Olive Talley	50.00	
Campaign Contribution	Contributor address; City; 6133 Prospect Ave		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor out-of-	state PAC (ID#:) Amount of contribution	(\$)
02/22/2023	Matthew Houston	250.00	
Campaign Contribution	Contributor address; City; 1504 Boca Chica Drive	State; Zip Code Dallas, TX 75232	
Principal occu	eation / Job title (See Instructions)	Employer (See Instructions)	
Date 02/21/2023	Full name of contributor out-of- Courtney Spellicy	-state PAC (ID#:) Amount of contribution 100.00	(\$)
Campaign Contribution	Contributor address; City; 7117 Wake Forest Drive	Dallas, TX 75214	
	 pation / Job title (See Instructions)	Employer (See Instructions)	

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SCHEDULE A1

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

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 9 of 9
2 FILER NAME Mr Tennell Atkir	s		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
01/12/2023	MRR & Associates LLC		500.00
Campaign Contribution	6 Contributor address; City; 400 N St. Paul St Suite 300 Dallas, 7	State; Zip Code ΓΧ 75201	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor	[ID#:)	Amount of contribution (\$)
02/27/2023	Lucy Billingsley		1000.00
Campaign Contribution	Contributor address; City;	State; Zip Code FX 75201	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	TID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	TID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
	477401140011101111001110011	E TUIC COUEDUI E AC N	

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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1:	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics C	ommission Filers)
4 Date	5 Payee name			
01/30/2023	The Order Desk			
6 Amount (\$) 385.00 Campaign Funds for Campaign Expenditures	7 Payee address; 9840 Monroe Dr Suite 1@ Allas, TX 75220	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	supplies		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living ex	pense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Of	fice held
Date	Payee name			
02/13/2023	The Order Desk			
Amount (\$) 155.00 Campaign Funds for	Payee address; 9840 Monroe Dr Suite 1@Pallas, TX 75220	City;	State;	Zip Code
Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living ex	pense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Of	fice held
Date	Payee name			
01/30/2023	The Order Desk			
Amount (\$) 530.89 Campaign Funds for Campaign Expenditures	Payee address; 9840 Monroe Dr Suite 104 allas, TX 75220	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	postage		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living exp	pense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	0	ffice held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 2 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/13/2023	The Order Desk		
6 Amount (\$) 89.53	7 Payee address; 9840 Monroe Dr Suite 140 allas, TX 75220	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Office Overhead/Rental Expense	postage	
OF EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
02/14/2023	Alligator Jacks		
Amount (\$) 40.00	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	5310 S Lamar Dallas, TX 75215		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Donation	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
01/05/2023	Gonzalez Restaurant		
Amount (\$) 30.98	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	367 Jefferson Blvd Dallas, TX 75208		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Food/Beverage Expense	food	
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 3 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	l	
01/09/2023	Lubys Store 0221		
6 Amount (\$) 56.87	7 Payee address; 5600 S Hampton Rd Dallas, TX 75232	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	•		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Food/Beverage Expense	food	
OF EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
01/09/2023	Campis		
Amount (\$) 44.62	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	1520 Elm St Suite 111 Dallas, TX 75201		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
02/06/2023	Campis		
Amount (\$) 47.54	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	1520 Elm St Suite 111 Dallas, TX 75201		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Food/Beverage Expense	food	
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 4 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
02/21/2023	Campis			
6 Amount (\$) 33.85 Campaign Funds for Campaign Expenditures	7 Payee address; 5600 Elm St Suite 111 Dallas, TX 75201	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
01/17/2023	Lisa Soul Food Cafe			
Amount (\$) 58.44	Payee address; 2550 W Redbird Ln Suite 404	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	Dallas, TX 75237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
01/23/2023	Popeyes #7391			
Amount (\$) 38.92	Payee address; 8181 S. Lancaster Rd Dallas, TX 75241	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	24.1.1.7.1.2.1.			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 5 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/30/2023	Nothing Bundt		
6 Amount (\$) 30.00 Campaign Funds for Campaign Expenditures	7 Payee address; 352 N Hwy 67 Suite B Cedar Hill, TX 75104	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
02/06/2023	Ojeda Family Restaurant		
Amount (\$) 63.81 Campaign Funds for Campaign Expenditures	Payee address; 2109 S Hampton Rd Desoto, TX 75115	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
02/07/2023	Golden Chick		
Amount (\$) 38.41 Campaign Funds for Campaign Expenditures	Payee address; 3789 W Camp Wisdom Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	:DED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Caron (onton a category morne	.54 45575)
1 Total pages Schedule F1: 6 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Comm	ission Filers)
4 Date 02/12/2023	5 Payee name Pancake House			
6 Amount (\$) 65.12 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 Lemmon Ave Suite Danoas, TX 75204	City;	State; Zip	Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	•
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office	held
Date 02/14/2023	Payee name Cheddars			
Amount (\$) 66.12 Campaign Funds for Campaign Expenditures	Payee address; 39640 LBJ Frwy Dallas, TX 75237	City;	State; Zip	Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office	held
Date	Payee name			
02/15/2023	Capital Grill			
Amount (\$) 61.96 Campaign Funds for Campaign Expenditures	Payee address; 500 Crescent Ct Dallas, TX 75201	City;	State; Zip	Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office	held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 7 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
02/18/2023	Baby Back Shack			
6 Amount (\$) 33.12 Campaign Funds for Campaign Expenditures	7 Payee address; 1800 Akard Dallas, TX 75215	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
02/21/2023	Olive Garden			
Amount (\$) 88.06	Payee address; 639 S Cockrell Hill Duncanville, TX 75116	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
03/03/2023	The Island Spot			
Amount (\$) 25.88	Payee address; 309 W Jefferson Blvd Dallas, TX 75208	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Council District 8	,	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 8 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
03/09/2023	Chick fil A			
6 Amount (\$) 48.37 Campaign Funds for Campaign Expenditures	7 Payee address; 387 E FM 1382 Suite 75 Cedar Hill, TX 75104	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
03/12/2023	Spring Creek BBQ			
Amount (\$) 39.94	Payee address; 2827 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures		T 5		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
03/18/2023	Chubbys			
Amount (\$) 34.82	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	7474 S Cockrell Hill Dallas, TX 75236			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Food/Beverage Expense	food		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 9 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/03/2023	Sams Club		
6 Amount (\$) 46.77 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
01/09/2023	Sams Club		
Amount (\$) 43.67	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
01/09/2023	Sams Club		
Amount (\$) 45.61	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2900 W Wheatland Dallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee 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 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
01/09/2023	Sams Club			
6 Amount (\$) 22.55	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
01/17/2023	Sams Club			
Amount (\$) 54.29	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
01/17/2023	Sams Club			
Amount (\$) 100.00	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	2700 w wilcanand Danas, 1A 73237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 11 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/23/2023	Sams Club		
6 Amount (\$) 53.74 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
01/30/2023	Sams Club		
Amount (\$) 21.21	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
01/30/2023	Sams Club		
Amount (\$) 100.00	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2700 w wilcattanu Danas, 1X /323/		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 12 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name			
02/07/2023	Sams Club			
6 Amount (\$) 55.78 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date	Payee name			
02/13/2023	Sams Club			
Amount (\$) 33.38	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held	
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
02/13/2023	Sams Club			
Amount (\$) 53.35	Payee address;	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures	2900 W Wheatland Dallas, TX 75237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 13 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/21/2023	Sams Club		
6 Amount (\$) 56.03 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
02/21/2023	Sams Club		
Amount (\$) 23.26	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
02/21/2023	Sams Club		
Amount (\$) 39.31	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2900 W Wheatland Dallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	,	•
1 Total pages Schedule F1: 14 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commiss	sion Filers)
4 Date	5 Payee name			
02/17/2023	Shell			
6 Amount (\$) 33.99 Campaign Funds for Campaign Expenditures	7 Payee address; 7027 S RL Thornton Dallas, TX 75232	City;	State; Zip C	ode
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office he	eld
Date	Payee name			
03/05/2023	Shell			
Amount (\$) 40.01 Campaign Funds for Campaign Expenditures	Payee address; 7027 S RL Thornton Dallas, TX 75232	City;	State; Zip C	ode
1 6	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office he	ld
Date	Payee name			
03/10/2023	Shell			
Amount (\$) 30.01	Payee address; 7027 S RL Thornton Dallas, TX 75232	City;	State; Zip C	ode
Campaign Funds for Campaign Expenditures	7027 S RL Inornton Dallas, 1X /3232			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office h	eld
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 15 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name			
01/01/2023	Sams Club			
6 Amount (\$) 40.76 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date	Payee name			
01/01/2023	Sams Club			
Amount (\$) 37.51	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held	
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
02/27/2023	Sams Club			
Amount (\$) 54.02	Payee address;	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures	2900 W Wheatland Dallas, TX 75237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 16 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/03/2023	Sams Club		
6 Amount (\$) 54.95 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/06/2023	Sams Club		
Amount (\$) 40.19	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
03/09/2023	Sams Club		
Amount (\$) 50.74	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2900 W Wheatland Dallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

,	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 17 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/13/2023	Sams Club		
6 Amount (\$) 54.00	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/14/2023	Sams Club		
Amount (\$) 40.51	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
03/14/2023	Sams Club		
Amount (\$) 31.17	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Orean Garar ayment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 18 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name			
03/20/2023	Sams Club			
6 Amount (\$) 56.54 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date	Payee name			
03/20/2023	Sams Club			
Amount (\$) 46.67	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held	
expenditure to benefit C/OF	Tennell Atkins	Council District 8		
Date	Payee name			
03/20/2023	Sams Club			
Amount (\$) 49.89	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures	2700 W Wilcariand Danas, 1X 13231			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)	
1 Total pages Schedule F1: 19 of 41	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)		
4 Date	5 Payee name	l		
03/24/2023	Sams Club			
6 Amount (\$) 38.77 Campaign Funds for	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code	
Campaign Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date	Payee name			
03/25/2023	Sams Club			
Amount (\$) 55.42	Payee address;	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures	2900 W Wheatland Dallas, TX 75237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held	
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
03/27/2023	Sams Club			
Amount (\$) 47.74	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures	2900 W Wheatland Dallas, TX 75237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 20 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
03/27/2023	Sams Club			
6 Amount (\$) 15.87 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
03/27/2023	Sams Club			
Amount (\$) 10.91	Payee address; 2900 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit 6/011	Tennell Atkins	Council District 8		
Date	Payee name			
03/27/2023	Sams Club			
Amount (\$) 58.11	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	2900 W Wheatland Dallas, TX 75237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 21 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/01/2023	AT&T		
6 Amount (\$) 451.62 Campaign Funds for	7 Payee address; P.O. Box 6811 Dallas, TX 75225	City;	State; Zip Code
Campaign Expenditures	(C) Cotogony (C) Cotogonicalists at the transfithing a haddely	(h) Description	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	phone	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
02/01/2023	AT&T		
Amount (\$) 413.75	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	P.O. Box 6811 Dallas, TX 75225		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	phone	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
03/01/2023	AT&T		
Amount (\$) 414.47	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	P.O. Box 6811 Dallas, TX 75225		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	phone	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 22 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Comm	ission Filers)
4 Date	5 Payee name		I	
02/06/2023	US Postal Office			
6 Amount (\$) 1890.00 Campaign Funds for Campaign Expenditures	7 Payee address; 3107 W Camp Wisdom Dallas, TX 75237	City;	State; Zip	Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	postage		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense	•
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office	held
Date	Payee name			
02/16/2023	US Postal Office			
Amount (\$) 63.00	Payee address; 3107 W Camp Wisdom Dallas, TX 75237	City;	State; Zip	Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	postage		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense)
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office	held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
03/06/2023	US Postal Office			
Amount (\$) 194.00	Payee address;	City;	State; Zip	Code
Campaign Funds for Campaign Expenditures	3107 W Camp Wisdom Dallas, TX 75237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	postage		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	•
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office	held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 23 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
02/17/2023	US Postal Office			
6 Amount (\$) 63.00 Campaign Funds for Campaign Expenditures	7 Payee address; 3107 W Camp Wisdom Dallas, TX 75237	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	postage		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
02/06/2023	HOME DEPOT			
Amount (\$) 144.28	Payee address; 2901 W WHEATLAND Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
02/16/2023	Home Depot			
Amount (\$) 101.73	Payee address; 29001 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	27001 W Wilcardand Bullas, TX 73237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Office Overhead/Rental Expense	supplies		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 24 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commis	ssion Filers)
4 Date	5 Payee name		I	
03/14/2023	HOME DEPOT			
6 Amount (\$) 23.87 Campaign Funds for Campaign Expenditures	7 Payee address; 2901 W WHEATLAND Dallas, TX 75237	City;	State; Zip (Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	supplies		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office h	neld
Date	Payee name			
02/13/2023	The Order Desk			
Amount (\$) 257.32	Payee address; 9840 Monroe Dr Suite 104 allas, TX 75220	City;	State; Zip (Code
Campaign Funds for Campaign Expenditures		T =		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	postage		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office h	ield
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
01/30/2023	The Order Desk			
Amount (\$) 947.65	Payee address; 9840 Monroe Dr Suite 1024allas, TX 75220	City;	State; Zip	Code
Campaign Funds for Campaign Expenditures	9040 Molifoe Di Suite Tusanas, 1A 73220			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	postage		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office	held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 25 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/27/2023	Reilly Echols Printing Inc		
6 Amount (\$) 1160.98 Campaign Funds for Campaign Expenditures	7 Payee address; 1710 S Hardwood Dallas, TX 75201	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Printing Expense	printing	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
02/06/2023	Reilly Echols Printing Inc		
Amount (\$) 478.76	Payee address; 1710 S Hardwood Dallas, TX 75201	City;	State; Zip Code
Campaign Funds for Campaign Expenditures		T 5	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Printing Expense	printing	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
03/19/2023	MMS Company Add Specialities		
Amount (\$) 2500.00	Payee address; 217 N I-35 Dessoto, TX 75115	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	217 N 1-35 Dessoio, 1A 75115		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertising Expense	yard signs	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	, , ,	,
1 Total pages Schedule F1: 26 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics 0	Commission Filers)
4 Date	5 Payee name			
03/14/2023	Ojeda Family Restaurant			
6 Amount (\$) 61.06 Campaign Funds for Campaign Expenditures	7 Payee address; 2109 S Hampton Rd Desoto, TX 75115	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living e	kpense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	O	ffice held
Date	Payee name			
03/06/2023	Popeyes #7391			
Amount (\$) 31.76	Payee address; 2972 W Wheatland Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living ex	pense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	0	ffice held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
03/08/2023	Red Lobster			
Amount (\$) 200.31	Payee address; 603 N Cockrell Hill Dallas, TX 75232	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	603 N Cockrell Hill Dallas, TX 75232			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Food/Beverage Expense	food		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living ex	pense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	C	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	care. (crief a category normatical azorto)
1 Total pages Schedule F1: 27 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	l	
03/16/2023	Pappadeux		
6 Amount (\$) 108.76 Campaign Funds for Campaign Expenditures	7 Payee address; 800 E Hwy 67 Duncanville, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
01/23/2023	Popeyes #7391		
Amount (\$) 38.92 Campaign Funds for Campaign Expenditures	Payee address; 2972 W Wheatland Dallas, TX 75237	City;	State; Zip Code
1 0 1	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/20/2023	Chick Fil A		
Amount (\$) 22.98 Campaign Funds for Campaign Expenditures	Payee address; 2429 W Wheatland Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 28 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/06/2023	Campis		
6 Amount (\$) 88.02	7 Payee address; 1520 Elm St Suite 111 Dallas, TX 75201	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Food/Beverage Expense	food	
OF EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/17/2023	Campis		
Amount (\$) 129.61	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	1520 Elm St Suite 111 Dallas, TX 75201		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Food/Beverage Expense	food	
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
03/20/2023	Chilis		
Amount (\$) 69.19	Payee address; 2503 W Wheatland Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for	2503 W Wheatland Dallas, TX 75237		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Food/Beverage Expense	food	
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	:DED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 29 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/13/2023	Chilis		
6 Amount (\$) 68.16 Campaign Funds for Campaign Expenditures	7 Payee address; 2503 W Wheatland Dallas, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
01/01/2023	Jefferson Monument		
Amount (\$) 350.00	Payee address; 1350 Manufacturing Dallas, TX 75207	City;	State; Zip Code
Campaign Funds for Campaign Expenditures		T =	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Rent	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
02/01/2023	Jefferson Monument		
Amount (\$) 350.00	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	1350 Manufacturing Dallas, TX 75207		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	rent	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	oute. (etter a category not noted above)	
1 Total pages Schedule F1: 30 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers))
4 Date	5 Payee name			
03/01/2023	Jefferson Monument			
6 Amount (\$) 350.00 Campaign Funds for Campaign Expenditures	7 Payee address; 1350 Manufacturing Dallas, TX 75207	City;	State; Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Rent		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date	Payee name			
03/04/2023	James & Iashun Virden			
Amount (\$) 120.00 Campaign Funds for Campaign Expenditures	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	salary		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date	Payee name			
03/05/2023	James & Iashun Virden			
Amount (\$) 120.00 Campaign Funds for Campaign Expenditures	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	salary		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 31 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	l	
03/06/2023	James & Iashun Virden		
6 Amount (\$) 300.00 Campaign Funds for Campaign Expenditures	7 Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	salary	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/11/2023	James & Iashun Virden		
Amount (\$) 180.00 Campaign Funds for Campaign Expenditures	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	salary	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/12/2023	James & Iashun Virden		
Amount (\$) 150.00 Campaign Funds for Campaign Expenditures	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	salary	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Ordan Oard Faymon	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 32 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/13/2023	James & Iashun Virden		
6 Amount (\$) 240.00	7 Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	salary	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/18/2023	James & Iashun Virden		
Amount (\$) 210.00	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	salary	
EXPENDITORE	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
03/19/2023	James & Iashun Virden		
Amount (\$) 180.00	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	5425 Hacicida Danas, 1A 75255		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	salary	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 33 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/20/2023	James & Iashun Virden		
6 Amount (\$) 450.00	7 Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Salaries/Wages/Contract Labor	salary	
EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/24/2023	James & Iashun Virden		
Amount (\$) 360.00	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	3425 Hacienda Dallas, TX 75233		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Salaries/Wages/Contract Labor	salary	
EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
03/25/2023	James & Iashun Virden		
Amount (\$) 210.00	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	5425 Hacienda Danas, 1A 75255		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Salaries/Wages/Contract Labor	salary	
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 34 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/26/2023	James & Iashun Virden		
6 Amount (\$) 180.00 Campaign Funds for Campaign Expenditures	7 Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	salary	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/27/2023	James & Iashun Virden		
Amount (\$) 300.00	Payee address; 3425 Hacienda Dallas, TX 75233	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	salary	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
02/17/2023	Gail Turner		
Amount (\$) 210.00 Campaign Funds for	Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State; Zip Code
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	,	,
1 Total pages Schedule F1: 35 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics (Commission Filers)
4 Date	5 Payee name			
03/03/2023	Gail Turner			
6 Amount (\$) 110.00 Campaign Funds for Campaign Expenditures	7 Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living e	xpense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	C	office held
Date	Payee name			
03/09/2023	Gail Turner			
Amount (\$) 120.00 Campaign Funds for Campaign Expenditures	Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State;	Zip Code
Campaign Expenditures	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living e	xpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	С	ffice held
Date	Payee name			
03/15/2023	Gail Turner			
Amount (\$) 130.00 Campaign Funds for Campaign Expenditures	Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living e	kpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	(Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	care. (crief a category normatical azorto)
1 Total pages Schedule F1: 36 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/07/2023	Gail Turner		
6 Amount (\$) 90.00 Campaign Funds for Campaign Expenditures	7 Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
02/20/2023	Gail Turner		
Amount (\$) 150.00 Campaign Funds for Campaign Expenditures	Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State; Zip Code
1 0 1	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
02/13/2023	Gail Turner		
Amount (\$) 120.00 Campaign Funds for Campaign Expenditures	Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 37 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/10/2023	Gail Turner		
6 Amount (\$) 85.00 Campaign Funds for Campaign Expenditures	7 Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
02/22/2023	Judy Williams		
Amount (\$) 100.00	Payee address; 409 Lou Street Duncanville, TX 75137	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
02/27/2023	Judy Williams		
Amount (\$) 90.00	Payee address; 409 Lou Street Duncanville, TX 75137	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	409 Lou Succet Duncanvine, 1A 75157		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 38 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/11/2023	Judy Williams		
6 Amount (\$) 70.00 Campaign Funds for Campaign Expenditures	7 Payee address; 409 Lou Street Duncanville, TX 75137	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/20/2023	Judy Williams		
Amount (\$) 90.00	Payee address; 409 Lou Street Duncanville, TX 75137	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
02/01/2023	Big Bang		
Amount (\$) 970.00	Payee address; 103 N. W. 14th St Grand Prairie, TX 75050	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	103 N. W. 14th St Grand Prame, 1X /3030		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Printing Expense	door hangers	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 39 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/02/2023	Big Bang		
6 Amount (\$) 450.00 Campaign Funds for	7 Payee address; 103 N. W. 14th St Grand Prairie, TX 75050	City;	State; Zip Code
Campaign Expenditures	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
8			
PURPOSE OF EXPENDITURE	Printing Expense	door hangers	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/07/2023	M&M Advertising		
Amount (\$) 1200.00	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	P.O. Box 1418 Desoto, TX 75123		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertising Expense	Advertising	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
03/07/2023	M&M Advertising		
Amount (\$) 450.00	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	P.O. Box 1418 Desoto, TX 75123		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertising Expense	Advertising	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 40 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/15/2023	Beyond The Slogam		
6 Amount (\$) 500.00 Campaign Funds for Campaign Expenditures	7 Payee address; 2710 Routh Creek Suite 4120 Richardson, TX 75061	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Consulting Expense	consultant	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
01/07/2023	Texas Democratic Party		
Amount (\$) 605.00 Campaign Funds for Campaign Expenditures	Payee address; P.O. Box 15707 Austin, TX 78761	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Consulting Expense	data base	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
01/17/2023	Elite News		
Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures	Payee address; P.O. Box 380071 Dallas, TX 75183	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertising Expense	advertising	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (effici a category not listed above)	1
1 Total pages Schedule F1: 41 of 41	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission File	ers)
4 Date	5 Payee name			
03/20/2023	ECO Latino			
6 Amount (\$) 500.00 Campaign Funds for Campaign Expenditures	7 Payee address; 2320 W Davis Dallas, TX 75208	City;	State; Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertising Expense	advertising		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date	Payee name			
02/15/2023	Terri Hodge			
Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures	Payee address; 7106 Abrams Rd Dallas, TX 75231	City;	State; Zip Code	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Consulting Expense	consultant		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date	Payee name			
Amount (\$)	Payee address;	City;	State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	