

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed: 41		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI		Date Received		
	Mr Tennell				
	NICKNAME LAST SUFFIX		Date Hand-delivered or Date Postmarked		
	Atkins		Receipt # Amount \$		
4 ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15		<input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify)		
	<input type="checkbox"/> July 15		<input type="checkbox"/> Exceeded \$500 limit		
	<input type="checkbox"/> 30th day before election		<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)		
	<input type="checkbox"/> 8th day before election		<input type="checkbox"/> Final report		
5 ORIGINAL PERIOD COVERED	Month Day Year	Month Day Year	Date Processed		
	07 / 01 / 2020 THROUGH 12 / 31 / 2020		Date Imaged		

6 EXPLANATION OF CORRECTION

Correcting Last Day Balance:\$37,503.69 (Line 5, Coversheet 2)

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

☐ **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 was made in good faith.

*** Electronically Certified ***

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Mr Tennell Atkins, this the 19th day of May, 2023, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed 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 Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)		2 Total pages filed: 41	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST Tennell	MI	OFFICE USE ONLY	
	NICKNAME	LAST Atkins	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2717 Meadow Stone Lane Dallas TX 75232			Date Received	
<input type="checkbox"/> Change of Address					
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (469) 417 8939				
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Velma	MI	Date Hand-delivered or Date Postmarked	
	NICKNAME	LAST Milliner	SUFFIX	Receipt #	Amount \$
				Date Processed	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1407 Laura Lane Dallas TX 75241			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 371 7482				
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)				
10 PERIOD COVERED	Month Day Year Month Day Year 07 / 01 / 2020 THROUGH 12 / 31 / 2020				
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special _____				
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) Council District 8		
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS			
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME
Mr Tennell Atkins

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR
CONTRIBUTIONS MADE ELECTRONICALLY)

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 45250.00

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 9452.52

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$ 37503.69

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 15000.00

18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information
required to be reported by me under Title 15, Election Code.

ELECTRONICALLY CERTIFIED

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Tennell Atkins this the 19th day of May,
20 23, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME Mr Tennell Atkins		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 45,250.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 9,452.52
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

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 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 11/01/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tre Black 6 Contributor address; City; State; Zip Code 2426 W Tenth St Dallas, TX 75211	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dave Wishnew Contributor address; City; State; Zip Code 1700 Pacific Dallas, TX 75204	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lille T Molett Contributor address; City; State; Zip Code 2723 Meadow Stone Lane Dallas, TX 75232	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joan Walne Contributor address; City; State; Zip Code 10200 Cariboo Trail Dallas, TX 75238	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<div>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</div> <div>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</div>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/02/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY BILLINGSLEY <hr/> 6 Contributor address; City; State; Zip Code 1722 ROUTH ST Suite 770 DALLAS, TX 75201	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack Cuz <hr/> Contributor address; City; State; Zip Code P.O. Box 173218 Arltinton, TX 76003	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southwestern Land and Title, LLC <hr/> Contributor address; City; State; Zip Code 627 Mercury Ave Duncanville, TX 75137	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven Kim <hr/> Contributor address; City; State; Zip Code 3905 Tidal Drive Carrollton, TX 76007	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 15

2 FILER NAME

Mr Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date

07/17/2020

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mason Brown III

7 Amount of contribution (\$)

1000.00

6 Contributor address;

P.O. Box 29615

City;

Dallas, TX 75229

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/12/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joan Walne

Amount of contribution (\$)

500.00

Contributor address;

10200 Cariboo Trail

City;

Dallas, TX 75238

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/15/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Douglas Hunt

Amount of contribution (\$)

1000.00

Contributor address;

610 Creek View Circle

City;

Ovilla, TX 75134

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/18/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dalton Lott

Amount of contribution (\$)

1000.00

Contributor address;

P.O. Box 765209

City;

Dallas, TX 75378

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 4 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 12/10/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helen Giddings <hr/> 6 Contributor address; City; State; Zip Code 400 S Zang Blvd Dallas, TX 75208	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Dunning <hr/> Contributor address; City; State; Zip Code 2100 Ross Ave Suite 1200 Dallas, TX 75201	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) R Steve Folsom <hr/> Contributor address; City; State; Zip Code 15475 Dallas Parkway Suite 800 Addison, TX 75001	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harlan Crow <hr/> Contributor address; City; State; Zip Code 3819 Maple Ave Dallas, TX 75219	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 10/12/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coats Rose <hr/> 6 Contributor address; City; State; Zip Code 3 Greenway Plaza Suite 1000 Houston, TX 77048	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaughn Thompson <hr/> Contributor address; City; State; Zip Code P.O. Box 561527 Dallas, TX 75356	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Rader <hr/> Contributor address; City; State; Zip Code P.O. Box 249 Colleyville, TX 76034	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley Spllicy <hr/> Contributor address; City; State; Zip Code 717 Wake Forrest Dr Dallas, TX 75214	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/28/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trelaine Mapp <hr/> 6 Contributor address; City; State; Zip Code 12612 Beech Tree Ln Dallas, TX 76040	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan Griffin <hr/> Contributor address; City; State; Zip Code P.O. Box 190829 Dallas, TX 75219	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Clarke <hr/> Contributor address; City; State; Zip Code 3491 Foxboro Drive Richardson, TX 75082	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M Rideau <hr/> Contributor address; City; State; Zip Code 0 SMU Box 75-3183 Dallas, TX 75275	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 08/14/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddie Reeves 6 Contributor address; City; State; Zip Code 1142 N Clinton Ave Dallas, TX 75208	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tante Williams Contributor address; City; State; Zip Code 1005 Lakeridge Ct Colleyville, TX 76034	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deedie Rose Contributor address; City; State; Zip Code 5 Willowood Dallas, TX 75205	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dr Maria Garcia Contributor address; City; State; Zip Code 618 W Jefferson Dallas, TX 75208	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/01/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert Wash <hr/> 6 Contributor address; City; State; Zip Code 731 S R L Thornton Frwy Dallas, TX 75203	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) V Neils Agather <hr/> Contributor address; City; State; Zip Code 5661 Mariner Dr Dallas, TX 75237	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delva King <hr/> Contributor address; City; State; Zip Code 1243 W Pleasant Run Rd Desot, TX 75115	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) johnnie king jr <hr/> Contributor address; City; State; Zip Code 1243 w pleasant run rd DeSoto, TX 75115	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

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

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/16/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joh Proctor 6 Contributor address; City; State; Zip Code 1524 Oak Meadows Dr Dallas, TX 75232	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETE SCHENKEL Contributor address; City; State; Zip Code 614 N BISHOP Suite 3 Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden Auto Parts Recyclers Contributor address; City; State; Zip Code 3301 S Lamar St Dallas, TX 75215	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynn McBee Contributor address; City; State; Zip Code 3925 Stonebridge Drive Dallas, TX 75204	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 12/22/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jon Napper 6 Contributor address; City; State; Zip Code 300 N Akard Suite 3106 Dallas, TX 75201	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gail Terrell Contributor address; City; State; Zip Code P.O. Box 41561 Dallas, TX 75241	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sam Coats Contributor address; City; State; Zip Code 26 Ryddington Place Dallas, TX 75230	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jewel Parrish Contributor address; City; State; Zip Code 1256 Regents Park Ct Desoto, TX 75115	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/20/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christine Paris <hr/> 6 Contributor address; City; State; Zip Code P.O. Box 7665129 Dallas, TX 75376	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert Aranza <hr/> Contributor address; City; State; Zip Code P.O. Box 601527 Dallas, TX 75360	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tina Rich <hr/> Contributor address; City; State; Zip Code P.O. Box 2083 Frisco, TX 75034	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Penz <hr/> Contributor address; City; State; Zip Code 6307 Pintail Ln Frisco, TX 75034-2290	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 13 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 08/19/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicole S Blake 6 Contributor address; City; State; Zip Code 11004 Ormond Lane Frisco, TX 75035	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendy McCain Contributor address; City; State; Zip Code 5284 Quail Run Frisco, TX 75034	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danielle Bernard Contributor address; City; State; Zip Code 5020 Kimber Ln Durant, OK 74701	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amber Libby Contributor address; City; State; Zip Code 2092 Hague Drive Frisco, OK 75033	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 08/20/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Brantley <hr/> 6 Contributor address; City; State; Zip Code P.O. Box 190829 Dallas, TX 75219	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clayton Thomas <hr/> Contributor address; City; State; Zip Code 6827 County Road 90 Celina, TX 75009	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pat Schenkel <hr/> Contributor address; City; State; Zip Code 4201 Belclair Ave Dallas, TX 75205	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucious Williams <hr/> Contributor address; City; State; Zip Code 1421 Covington Dr Desoto, TX 75115	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 12/07/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucy Billingsley <hr/> 6 Contributor address; City; State; Zip Code 1722 Routh St Suite 770 Dallas, TX 75201	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawatha Williams <hr/> Contributor address; City; State; Zip Code 1014 Clifton Lane Desoto, TX 75115	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AECOM PAC <hr/> Contributor address; City; State; Zip Code 2000 K St. Suite 800 Washington, DC 20006	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 07/01/2020	5 Payee name ATT	
6 Amount (\$) 485.37	7 Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description phone
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8 Office held
Date 08/01/2020	Payee name ATT	
Amount (\$) 387.36	Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description phone
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8 Office held
Date 09/01/2020	Payee name ATT	
Amount (\$) 250.90	Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description phone
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8 Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/01/2020	5 Payee name ATT	
6 Amount (\$) 551.47	7 Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description phone
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8
Date 11/01/2020	Payee name ATT	
Amount (\$) 251.00	Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description phone
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8
Date 12/01/2020	Payee name ATT	
Amount (\$) 501.00	Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description phone
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 07/01/2020	5 Payee name Jefferson Monument	
6 Amount (\$) 350.00	7 Payee address; City; State; Zip Code 1350 Manufacturing St Dallas TX 75207	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description office rent
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 08/01/2020	Payee name Jefferson Monument	
Amount (\$) 350.00	Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description office rent
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 09/01/2020	Payee name Jefferson Monument	
Amount (\$) 350.00	Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description office rent
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/01/2020	5 Payee name Jefferson Monument	
6 Amount (\$) 350.00	7 Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description office rent
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8
Date 11/01/2020	Payee name Jefferson Monument	
Amount (\$) 350.00	Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description office rent
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8
Date 12/01/2020	Payee name Jefferson Monument	
Amount (\$) 350.00	Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description office rent
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 12/01/2020	5 Payee name Jeff Dalton	
6 Amount (\$) 2000.00	7 Payee address; City; State; Zip Code 8552 Royal County Down Dr McKinney, TX 75070	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description consultation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 08/03/2020	Payee name Sams Club	
Amount (\$) 29.29	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 08/03/2020	Payee name Sams Club	
Amount (\$) 21.97	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 08/13/2020	5 Payee name Sams Club	
6 Amount (\$) 27.04	7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 08/26/2020	Payee name Sams Club	
Amount (\$) 37.52	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 08/31/2020	Payee name Sams Club	
Amount (\$) 29.88	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 08/31/2020	5 Payee name Sams Club	
6 Amount (\$) 35.05	7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8
Date 09/04/2020	Payee name Sams Club	
Amount (\$) 20.21	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8
Date 09/08/2020	Payee name Sams Club	
Amount (\$) 32.66	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 09/16/2020	5 Payee name Sams Club	
6 Amount (\$) 36.48	7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 09/23/2020	Payee name Sams Club	
Amount (\$) 29.42	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 09/29/2020	Payee name Sams Club	
Amount (\$) 29.54	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/05/2020	5 Payee name Sams Club	
6 Amount (\$) 30.93	7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 10/09/2020	Payee name Sams Club	
Amount (\$) 26.58	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 10/13/2020	Payee name Sams Club	
Amount (\$) 27.87	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 10 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 10/27/2020		5 Payee name Sams Club			
6 Amount (\$) 9.39		7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		(b) Description gas		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <div>Candidate / Officeholder name Tennell Atkins</div> <div>Office sought Council District 8</div> <div>Office held</div> </div>					
Date 11/02/2020		Payee name Sams Club			
Amount (\$) 32.04		Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description gas		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <div>Candidate / Officeholder name Tennell Atkins</div> <div>Office sought Council District 8</div> <div>Office held</div> </div>					
Date 11/09/2020		Payee name Sams Club			
Amount (\$) 27.90		Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description g		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <div>Candidate / Officeholder name Tennell Atkins</div> <div>Office sought Council District 8</div> <div>Office held</div> </div>					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 11/10/2020	5 Payee name Sams Club	
6 Amount (\$) 20.58	7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 11/16/2020	Payee name Sams Club	
Amount (\$) 30.05	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 12/01/2020	Payee name Sams Club	
Amount (\$) 25.09	Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 12/18/2020		5 Payee name Sams Club			
6 Amount (\$) 38.29		7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		(b) Description gas		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:					
Date 08/03/2020		Payee name Tennell Atkins Home Depot			
Amount (\$) 117.99		Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description supplies		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:					
Date 10/05/2020		Payee name Tennell Atkins Home Depot			
Amount (\$) 90.00		Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description supplies		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 13 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 08/24/2020	5 Payee name Luke Locker	
6 Amount (\$) 76.66	7 Payee address; City; State; Zip Code 3046 Mockingbird Lane Dallas, TX 75205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description gift
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 08/31/2020	Payee name Baby Back Shack	
Amount (\$) 31.66	Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 09/08/2020	Payee name Tennell Atkins Baby Back Shack	
Amount (\$) 29.23	Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 14 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 09/17/2020	5 Payee name Baby Back Shack	
6 Amount (\$) 18.51	7 Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Food
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held Tennell Atkins Council District 8		
Date 10/02/2020	Payee name Baby Back Shack	
Amount (\$) 45.78	Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held Tennell Atkins Council District 8		
Date 09/01/2020	Payee name KFC	
Amount (\$) 28.60	Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held Tennell Atkins Council District 8		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 15 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2020	5 Payee name KFC	
6 Amount (\$) 11.76	7 Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Food
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8
Date 09/30/2020	Payee name KFC	
Amount (\$) 9.72	Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8
Date 11/04/2020	Payee name Chilis	
Amount (\$) 32.74	Payee address; City; State; Zip Code 2503 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 16 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 09/08/2020	5 Payee name Whataburger	
6 Amount (\$) 12.20	7 Payee address; City; State; Zip Code 3222 W Camp Wisdom Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Food
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 09/14/2020	Payee name Red Lobster	
Amount (\$) 91.03	Payee address; City; State; Zip Code 603 N Cockrell Hill Rd Duncanville, TX 75116	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 09/14/2020	Payee name Lubys	
Amount (\$) 23.36	Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 17 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 09/21/2020	5 Payee name Lubys	
6 Amount (\$) 46.01	7 Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Food
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 09/25/2020	Payee name Lubys	
Amount (\$) 25.51	Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 10/05/2020	Payee name Lubys	
Amount (\$) 22.16	Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 10/20/2020		5 Payee name Lubys			
6 Amount (\$) 34.28		7 Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held
Date 10/30/2020		Payee name Lubys			
Amount (\$) 35.37		Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Food		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held
Date 10/08/2020		Payee name Chick-Fila			
Amount (\$) 28.43		Payee address; City; State; Zip Code 2429 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Food		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 19 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/09/2020	5 Payee name Ojeda	
6 Amount (\$) 53.58	7 Payee address; City; State; Zip Code 2109 N Hampton Desoto, TX 75115	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Food
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 11/02/2020	Payee name Williams Chicken	
Amount (\$) 30.30	Payee address; City; State; Zip Code 6220 Marvin D Love Fw Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 11/06/2020	Payee name Olive Garden	
Amount (\$) 39.06	Payee address; City; State; Zip Code 639 S Cockrell Hill Rd Duncanville, TX 75116	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 20 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/13/2020	5 Payee name Target	
6 Amount (\$) 178.05	7 Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description gift
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8 Office held
Date 10/26/2020	Payee name Party City	
Amount (\$) 35.73	Payee address; City; State; Zip Code 39759 LBJ Frwy Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8 Office held
Date 10/26/2020	Payee name Office Depot	
Amount (\$) 9.39	Payee address; City; State; Zip Code 39759 LBJ Frwy Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8 Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 21 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 11/25/2020	5 Payee name Office Depot	
6 Amount (\$) 194.83	7 Payee address; City; State; Zip Code 39759 LBJ Frwy Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8
Date 11/12/2020	Payee name Popeyes	
Amount (\$) 9.37	Payee address; City; State; Zip Code 2972 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8
Date 10/26/2020	Payee name Auto Zone	
Amount (\$) 149.58	Payee address; City; State; Zip Code 1201 W Camp Wisdom Dallas, TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description automobile
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/23/2020	5 Payee name Halls Honey Fired Chicken	
6 Amount (\$) 23.35	7 Payee address; City; State; Zip Code 4105 W Camp Wisdom Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Food
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 7 Office held:		
Date 10/26/2020	Payee name Allstate	
Amount (\$) 283.21	Payee address; City; State; Zip Code 1300 Summit Ave Suite 1010 Worth, TX 76102-4440	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description auto insurance
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		
Date 12/11/2020	Payee name Pappadeaux	
Amount (\$) 92.17	Payee address; City; State; Zip Code 800 E Hwy 67 Duncanville, TX 75137	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 23 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 12/06/2020		5 Payee name McDonalds			
6 Amount (\$) 18.02		7 Payee address; City; State; Zip Code 125 W Camp Wisdom Dallas, TX 75232			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 12/18/2020		Payee name Black Business Director			
Amount (\$) 400.00		Payee address; City; State; Zip Code P.O. Box 830631 Richardson, TX 75083			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description E-Glass display		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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Supplemental Report Officeholder

FORM Cover Sheet SR

1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST Tennell	MI	2. Total Pages Filed: 39
	NICKNAME	LAST Atkins	SUFFIX	3. Office Held
4. SUPPLEMENTAL REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report			
5. PERIOD / COVERED	7/1/2020 THROUGH 12/31/2020			
6. ELECTION	Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> N/A			
7. OFFICE-HOLDER	CONTRIBUTION TOTALS	1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 0.00
	EXPENDITURE TOTALS	3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00
		4. TOTAL OFFICEHOLDER EXPENDITURES		\$ 0.00
8. POLITICAL (Campaign)	CONTRIBUTION TOTALS	5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 45,250.00
	EXPENDITURE TOTALS	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 0.00
		8. TOTAL POLITICAL EXPENDITURES		\$ 9,452.52
9. OFFICEHOLDER FUNDS USED FOR CAMPAIGN PURPOSES		9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIBUTIONS USED FOR CAMPAIGN EXPENDITURES DURING THE REPORTING PERIOD		\$ 0.00
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> 10. AFFIDAVIT AFFIX NOTARY STAMP / SEAL ABOVE </div> <div style="width: 55%; text-align: center;"> I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election code. ***ELECTRONICALLY CERTIFIED*** _____ Signature of Candidate or Officeholder </div> </div>				
Sworn to and subscribed before me, by the said <u>Mr Tennell Atkins</u> , this the <u>19th</u> day of <u>May</u> , 20 <u>23</u> , to certify which, witness my hand and seal of office.				
<div style="display: flex; justify-content: space-between;"> <div>Signature of officer administering oath</div> <div>Printed name of officer administering oath</div> <div>Title of officer administering oath</div> </div>				

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 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 11/01/2020 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tre Black 6 Contributor address; City; State; Zip Code 2426 W Tenth St Dallas, TX 75211	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/01/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dave Wishnew Contributor address; City; State; Zip Code 1700 Pacific Dallas, TX 75204	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/01/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lille T Molett Contributor address; City; State; Zip Code 2723 Meadow Stone Lane Dallas, TX 75232	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/01/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joan Walne Contributor address; City; State; Zip Code 10200 Cariboo Trail Dallas, TX 75238	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/02/2020 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY BILLINGSLEY 6 Contributor address; City; State; Zip Code 1722 ROUTH ST Suite 770 DALLAS, TX 75201	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/04/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack Cuz Contributor address; City; State; Zip Code P.O. Box 173218 Arltinton, TX 76003	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/04/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southwestern Land and Title, LLC Contributor address; City; State; Zip Code 627 Mercury Ave Duncanville, TX 75137	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/06/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven Kim Contributor address; City; State; Zip Code 3905 Tidal Drive Carrollton, TX 76007	Amount of contribution (\$) 500.00
Principal occupation / 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: 3 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/17/2020 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason Brown III 6 Contributor address; City; State; Zip Code P.O. Box 29615 Dallas, TX 75229	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joan Walne Contributor address; City; State; Zip Code 10200 Cariboo Trail Dallas, TX 75238	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas Hunt Contributor address; City; State; Zip Code 610 Creek View Circle Ovilla, TX 75134	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalton Lott Contributor address; City; State; Zip Code P.O. Box 765209 Dallas, TX 75378	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<div> </div>		
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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: 4 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 12/10/2020 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helen Giddings 6 Contributor address; City; State; Zip Code 400 S Zang Blvd Dallas, TX 75208	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Dunning Contributor address; City; State; Zip Code 2100 Ross Ave Suite 1200 Dallas, TX 75201	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/07/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) R Steve Folsom Contributor address; City; State; Zip Code 15475 Dallas Parkway Suite 800 Addison, TX 75001	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/16/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harlan Crow Contributor address; City; State; Zip Code 3819 Maple Ave Dallas, TX 75219	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 10/12/2020 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coats Rose 6 Contributor address; City; State; Zip Code 3 Greenway Plaza Suite 1000 Houston, TX 77048	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/08/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaughn Thompson Contributor address; City; State; Zip Code P.O. Box 561527 Dallas, TX 75356	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Rader Contributor address; City; State; Zip Code P.O. Box 249 Colleyville, TX 76034	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley Spllicy Contributor address; City; State; Zip Code 717 Wake Forrest Dr Dallas, TX 75214	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/28/2020 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trelaine Mapp 6 Contributor address; City; State; Zip Code 12612 Beech Tree Ln Dallas, TX 76040	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/19/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan Griffin Contributor address; City; State; Zip Code P.O. Box 190829 Dallas, TX 75219	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/19/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Clarke Contributor address; City; State; Zip Code 3491 Foxboro Drive Richardson, TX 75082	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/14/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M Rideau Contributor address; City; State; Zip Code 0 SMU Box 75-3183 Dallas, TX 75275	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 08/14/2020 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddie Reeves 6 Contributor address; City; State; Zip Code 1142 N Clinton Ave Dallas, TX 75208	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/14/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tante Williams Contributor address; City; State; Zip Code 1005 Lakeridge Ct Colleyville, TX 76034	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/01/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deedie Rose Contributor address; City; State; Zip Code 5 Willowood Dallas, TX 75205	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/01/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dr Maria Garcia Contributor address; City; State; Zip Code 618 W Jefferson Dallas, TX 75208	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8 of 15

2 FILER NAME

Mr Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date

07/01/2020

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Albert Wash

7 Amount of contribution (\$)

500.00

6 Contributor address;

731 S R L Thornton Frwy

City;

Dallas, TX 75203

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/01/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

V Neils Agather

Amount of contribution (\$)

1000.00

Contributor address;

5661 Mariner Dr

City;

Dallas, TX 75237

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/28/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Delva King

Amount of contribution (\$)

1000.00

Contributor address;

1243 W Pleasant Run Rd

City;

Desot, TX 75115

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/28/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

johnnie king jr

Amount of contribution (\$)

1000.00

Contributor address;

1243 w pleasant run rd

City;

DeSoto, TX 75115

State; Zip Code

Principal occupation / 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 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 12/14/2020 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roland Parrish 6 Contributor address; City; State; Zip Code 1256 Regents Park Ct Desoto, TX 75115	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/01/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobby Lyle Contributor address; City; State; Zip Code 24 Masland Circle Dallas, TX 75230	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/01/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwin Cabaniss Contributor address; City; State; Zip Code 1344 N Windomere Ave Dallas, TX 75208	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/01/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sophia Johnson Contributor address; City; State; Zip Code 1001 Belleview St Dallas, TX 75215	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/16/2020 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joh Proctor 6 Contributor address; City; State; Zip Code 1524 Oak Meadows Dr Dallas, TX 75232	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/15/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETE SCHENKEL Contributor address; City; State; Zip Code 614 N BISHOP Suite 3 Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/17/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden Auto Parts Recyclers Contributor address; City; State; Zip Code 3301 S Lamar St Dallas, TX 75215	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynn McBee Contributor address; City; State; Zip Code 3925 Stonebridge Drive Dallas, TX 75204	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 12/22/2020 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jon Napper 6 Contributor address; City; State; Zip Code 300 N Akard Suite 3106 Dallas, TX 75201	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/17/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gail Terrell Contributor address; City; State; Zip Code P.O. Box 41561 Dallas, TX 75241	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/22/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sam Coats Contributor address; City; State; Zip Code 26 Ryddington Place Dallas, TX 75230	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/12/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jewel Parrish Contributor address; City; State; Zip Code 1256 Regents Park Ct Desoto, TX 75115	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 07/20/2020 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christine Paris 6 Contributor address; City; State; Zip Code P.O. Box 7665129 Dallas, TX 75376	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/07/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert Aranza Contributor address; City; State; Zip Code P.O. Box 601527 Dallas, TX 75360	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/19/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tina Rich Contributor address; City; State; Zip Code P.O. Box 2083 Frisco, TX 75034	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/18/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Penz Contributor address; City; State; Zip Code 6307 Pintail Ln Frisco, TX 75034-2290	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 13 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 08/19/2020 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicole S Blake 6 Contributor address; City; State; Zip Code 11004 Ormond Lane Frisco, TX 75035	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/19/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendy McCain Contributor address; City; State; Zip Code 5284 Quail Run Frisco, TX 75034	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/19/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danielle Bernard Contributor address; City; State; Zip Code 5020 Kimber Ln Durant, OK 74701	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/20/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amber Libby Contributor address; City; State; Zip Code 2092 Hague Drive Frisco, OK 75033	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 08/20/2020 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Brantley 6 Contributor address; City; State; Zip Code P.O. Box 190829 Dallas, TX 75219	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/20/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clayton Thomas Contributor address; City; State; Zip Code 6827 County Road 90 Celina, TX 75009	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pat Schenkel Contributor address; City; State; Zip Code 4201 Belclair Ave Dallas, TX 75205	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucious Williams Contributor address; City; State; Zip Code 1421 Covington Dr Desoto, TX 75115	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15 of 15
2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 12/07/2020 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucy Billingsley 6 Contributor address; City; State; Zip Code 1722 Routh St Suite 770 Dallas, TX 75201	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/15/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawatha Williams Contributor address; City; State; Zip Code 1014 Clifton Lane Desoto, TX 75115	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/17/2020 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AECOM PAC Contributor address; City; State; Zip Code 2000 K St. Suite 800 Washington, DC 20006	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 07/01/2020		5 Payee name ATT			
6 Amount (\$) 485.37 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description phone		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 08/01/2020		Payee name ATT			
Amount (\$) 387.36 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description phone		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 09/01/2020		Payee name ATT			
Amount (\$) 250.90 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description phone		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 10/01/2020		5 Payee name ATT			
6 Amount (\$) 551.47 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description phone		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 11/01/2020		Payee name ATT			
Amount (\$) 251.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description phone		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 12/01/2020		Payee name ATT			
Amount (\$) 501.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225-5414			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description phone		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 07/01/2020		5 Payee name Jefferson Monument			
6 Amount (\$) 350.00 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 1350 Manufacturing St Suite 101 Dallas, TX 75207			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description office rent		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:					
Date 08/01/2020		Payee name Jefferson Monument			
Amount (\$) 350.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description office rent		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:					
Date 09/01/2020		Payee name Jefferson Monument			
Amount (\$) 350.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description office rent		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held:					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 10/01/2020		5 Payee name Jefferson Monument			
6 Amount (\$) 350.00 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description office rent		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held
Date 11/01/2020		Payee name Jefferson Monument			
Amount (\$) 350.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description office rent		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held
Date 12/01/2020		Payee name Jefferson Monument			
Amount (\$) 350.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75207			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description office rent		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 12/01/2020		5 Payee name Jeff Dalton			
6 Amount (\$) 2000.00 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 8552 Royal County Down Drive McKinney, TX 75070			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description consultation		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 08/03/2020		Payee name Sams Club			
Amount (\$) 29.29 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description gas		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 08/03/2020		Payee name Sams Club			
Amount (\$) 21.97 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description gas		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 08/13/2020		5 Payee name Sams Club			
6 Amount (\$) 27.04 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		(b) Description gas		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 08/26/2020		Payee name Sams Club			
Amount (\$) 37.52 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description gas		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 08/31/2020		Payee name Sams Club			
Amount (\$) 29.88 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description gas		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 08/31/2020		5 Payee name Sams Club			
6 Amount (\$) 35.05 Campaign Funds for Campaign Expenditures		7 Payee address; 2900 W Wheatland Rd 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) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8 Office held	
Date 09/04/2020		Payee name Sams Club			
Amount (\$) 20.21 Campaign Funds for Campaign Expenditures		Payee address; 2900 W Wheatland Rd 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	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8 Office held	
Date 09/08/2020		Payee name Sams Club			
Amount (\$) 32.66 Campaign Funds for Campaign Expenditures		Payee address; 2900 W Wheatland Rd 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	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8 Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 09/16/2020		5 Payee name Sams Club			
6 Amount (\$) 36.48 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		(b) Description gas		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held
Date 09/23/2020		Payee name Sams Club			
Amount (\$) 29.42 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description gas		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held
Date 09/29/2020		Payee name Sams Club			
Amount (\$) 29.54 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description gas		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 10/05/2020		5 Payee name Sams Club			
6 Amount (\$) 30.93 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		(b) Description gas		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 10/09/2020		Payee name Sams Club			
Amount (\$) 26.58 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description gas		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 10/13/2020		Payee name Sams Club			
Amount (\$) 27.87 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description gas		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
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 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 10/27/2020		5 Payee name Sams Club			
6 Amount (\$) 9.39 Campaign Funds for Campaign Expenditures		7 Payee address; 2900 W Wheatland Rd 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) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held
Date 11/02/2020		Payee name Sams Club			
Amount (\$) 32.04 Campaign Funds for Campaign Expenditures		Payee address; 2900 W Wheatland Rd 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		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held
Date 11/09/2020		Payee name Sams Club			
Amount (\$) 27.90 Campaign Funds for Campaign Expenditures		Payee address; 2900 W Wheatland Rd 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 g		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 11/10/2020		5 Payee name Sams Club			
6 Amount (\$) 20.58 Campaign Funds for Campaign Expenditures		7 Payee address; 2900 W Wheatland Rd 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) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8 Office held	
Date 11/16/2020		Payee name Sams Club			
Amount (\$) 30.05 Campaign Funds for Campaign Expenditures		Payee address; 2900 W Wheatland Rd 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	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8 Office held	
Date 12/01/2020		Payee name Sams Club			
Amount (\$) 25.09 Campaign Funds for Campaign Expenditures		Payee address; 2900 W Wheatland Rd 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	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8 Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 12/18/2020		5 Payee name Sams Club			
6 Amount (\$) 38.29 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 2900 W Wheatland Rd Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		(b) Description gas		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held
Date 08/03/2020		Payee name Tennell Atkins Home Depot			
Amount (\$) 117.99 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description supplies		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held
Date 10/05/2020		Payee name Tennell Atkins Home Depot			
Amount (\$) 90.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description supplies		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 13 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 08/24/2020	5 Payee name Luke Locker	
6 Amount (\$) 76.66 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 3046 Mockingbird Lane Dallas, TX 75205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description gift
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8
Office held		
Date 08/31/2020	Payee name Baby Back Shack	
Amount (\$) 31.66 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8
Office held		
Date 09/08/2020	Payee name Tennell Atkins Baby Back Shack	
Amount (\$) 29.23 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8
Office held		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 14 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 09/17/2020		5 Payee name Baby Back Shack			
6 Amount (\$) 18.51 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 10/02/2020		Payee name Baby Back Shack			
Amount (\$) 45.78 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 1800 S Akard St Dallas, TX 75215			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Food		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 09/01/2020		Payee name KFC			
Amount (\$) 28.60 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Food		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 15 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 09/22/2020		5 Payee name KFC			
6 Amount (\$) 11.76 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 09/30/2020		Payee name KFC			
Amount (\$) 9.72 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 3415 W Camp Wisdom Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Food		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 11/04/2020		Payee name Chilis			
Amount (\$) 32.74 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 2503 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Food		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 16 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 09/08/2020		5 Payee name Whataburger			
6 Amount (\$) 12.20 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 3222 W Camp Wisdom Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held
Date 09/14/2020		Payee name Red Lobster			
Amount (\$) 91.03 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 603 N Cockrell Hill Rd Duncanville, TX 75116			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Food		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held
Date 09/14/2020		Payee name Lubys			
Amount (\$) 23.36 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Food		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 17 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 09/21/2020		5 Payee name Lubys			
6 Amount (\$) 46.01 Campaign Funds for Campaign Expenditures		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) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8 Office held	
Date 09/25/2020		Payee name Lubys			
Amount (\$) 25.51 Campaign Funds for Campaign Expenditures		Payee address; 5600 S Hampton Rd 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	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8 Office held	
Date 10/05/2020		Payee name Lubys			
Amount (\$) 22.16 Campaign Funds for Campaign Expenditures		Payee address; 5600 S Hampton Rd 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	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8 Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 10/20/2020		5 Payee name Lubys			
6 Amount (\$) 34.28 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held
Date 10/30/2020		Payee name Lubys			
Amount (\$) 35.37 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 5600 S Hampton Rd Dallas, TX 75232			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Food		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held
Date 10/08/2020		Payee name Chick-Fila			
Amount (\$) 28.43 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 2429 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Food		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 19 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 10/09/2020		5 Payee name Ojeda			
6 Amount (\$) 53.58 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 2109 N Hampton Desoto, TX 75115			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Office held					
Date 11/02/2020		Payee name Williams Chicken			
Amount (\$) 30.30 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 6220 Marvin D Love Fw Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Food		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Office held					
Date 11/06/2020		Payee name Olive Garden			
Amount (\$) 39.06 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 639 S Cockrell Hill Rd Duncanville, TX 75116			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Food		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Office held					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 20 of 23	2 FILER NAME Mr Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 10/13/2020	5 Payee name Target	
6 Amount (\$) 178.05 Campaign Funds for Campaign Expenditures	7 Payee address; 39739 LBJ Frwy Dallas, TX 75237 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description gift
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8 Office held
Date 10/26/2020	Payee name Party City	
Amount (\$) 35.73 Campaign Funds for Campaign Expenditures	Payee address; 39759 LBJ Frwy 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
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8 Office held
Date 10/26/2020	Payee name Office Depot	
Amount (\$) 9.39 Campaign Funds for Campaign Expenditures	Payee address; 39759 LBJ Frwy 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
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8 Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 21 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 11/25/2020		5 Payee name Office Depot			
6 Amount (\$) 194.83 Campaign Funds for Campaign Expenditures		7 Payee address; 39759 LBJ Frwy 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) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8 Office held	
Date 11/12/2020		Payee name Popeyes			
Amount (\$) 9.37 Campaign Funds for Campaign Expenditures		Payee address; 2972 W Wheatland Rd 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	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8 Office held	
Date 10/26/2020		Payee name Auto Zone			
Amount (\$) 149.58 Campaign Funds for Campaign Expenditures		Payee address; 1201 W Camp Wisdom 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 automobile	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8 Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
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: 22 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 10/23/2020		5 Payee name Halls Honey Fired Chicken			
6 Amount (\$) 23.35 Campaign Funds for Campaign Expenditures		7 Payee address; 4105 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) Food/Beverage Expense		(b) Description Food	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 7 Office held	
Date 10/26/2020		Payee name Allstate			
Amount (\$) 283.21 Campaign Funds for Campaign Expenditures		Payee address; 1300 Summit Ave Suite 417 Ft. Worth, TX 76102-4440 City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description auto insurance	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8 Office held	
Date 12/11/2020		Payee name Pappadeaux			
Amount (\$) 92.17 Campaign Funds for Campaign Expenditures		Payee address; 800 E Hwy 67 Duncanville, TX 75137 City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Food	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8 Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 23 of 23		2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 12/06/2020		5 Payee name McDonalds			
6 Amount (\$) 18.02 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 125 W Camp Wisdom Dallas, TX 75232			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
Date 12/18/2020		Payee name Black Business Director			
Amount (\$) 400.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code P.O. Box 830631 Richardson, TX 75083			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description E-Glass display		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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