

Supplemental Report Officeholder

FORM Cover Sheet SR

1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST Chad	MI	2. Total Pages Filed: 34
	NICKNAME	LAST West	SUFFIX	3. Office Held Council District 1
4. SUPPLEMENTAL REPORT TYPE	<div style="display: flex; justify-content: space-between;"> <div> c January 15 c July 15 </div> <div> <input checked="" type="checkbox"/> 30th day before election c 8th day before election </div> <div> c Runoff c Exceeded \$500 limit </div> <div> c 15th day after campaign treasurer appointment (officeholder only) c Final Report </div> </div>			
5. PERIOD / COVERED	1/1/2021 THROUGH 3/22/2021			
6. ELECTION	<div style="display: flex; justify-content: space-between;"> <div>Month Day Year 5/1/2021</div> <div> c Primary c Runoff <input checked="" type="checkbox"/> General c Special c N/A </div> </div>			
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)		\$ 21,639.28
	EXPENDITURE TOTALS	3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00
		4. TOTAL OFFICEHOLDER EXPENDITURES		\$ 27,761.08
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)		\$ 1,500.00
	EXPENDITURE TOTALS	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 0.00
		8. TOTAL POLITICAL EXPENDITURES		\$ 0.00
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 Chad West</u> , this the <u>31st</u> day of <u>March</u> , 20 <u>21</u> , to certify which, witness my hand and seal of office.				
<div style="display: flex; justify-content: space-between;"> <div>Signature of officer administering oath</div> <div>Printed name of officer administering oath</div> <div>Title of officer administering oath</div> </div>				

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Mr Chad West

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

03/08/2021

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

William Addy

6 Contributor address;

City; State; Zip Code

3805 Lausanne Ave

Dallas, TX 75208

7 Amount of contribution (\$)

100.00

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

Date

03/21/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Angle

Contributor address;

City; State; Zip Code

2420 S. Adams St.

Ft. Worth, TX 76110

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/12/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Marcus Baker

Contributor address;

City; State; Zip Code

1326 Hollywood Ave.

Dallas, TX 75208

Amount of contribution (\$)

23.44

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/27/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris / Brent Bolding

Contributor address;

City; State; Zip Code

302 Rosemont Ave.

Dallas, TX 75208

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Mr Chad West

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

01/13/2021

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

Jacob Brown

6 Contributor address;

City; State; Zip Code

1805 W. 29th St.

Austin, TX 78703

7 Amount of contribution (\$)

949.70

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

Date

01/14/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sally Cain

Contributor address;

City; State; Zip Code

6307 Club Lake Ct.

Dallas, TX 75214

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lauren Clayton

Contributor address;

City; State; Zip Code

918 Thomasson Dr.

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/01/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Richard Collins

Contributor address;

City; State; Zip Code

8150 N Central Expwy.

Dallas, TX 75206

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Mr Chad West

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

03/09/2021

Officeholder
Contribution**5** Full name of contributor

Casey Conner

☐ out-of-state PAC (ID#: _____)**6** Contributor address;

1811 Green Tree Ln.

City; State; Zip Code

Duincanville, TX 75137

7 Amount of contribution (\$)

100.00

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

Date

02/23/2021

Officeholder
Contribution

Full name of contributor

John Crowley

☐ out-of-state PAC (ID#: _____)

Contributor address;

1109 Lausanne Ave

City; State; Zip Code

Dallas, TX 75208

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2021

Officeholder
Contribution

Full name of contributor

David Dunnigan 2

☐ out-of-state PAC (ID#: _____)

Contributor address;

2157 Kessler Ct.

City; State; Zip Code

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/12/2021

Officeholder
Contribution

Full name of contributor

Christopher Edgemon

☐ out-of-state PAC (ID#: _____)

Contributor address;

5540 Farquhar

City; State; Zip Code

Dallas, TX 75209

Amount of contribution (\$)

94.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Mr Chad West

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

01/18/2021

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

Anne Foster

6 Contributor address;

City; State; Zip Code

221 N. Windomere Ave

Dallas, TX 75208

7 Amount of contribution (\$)

94.70

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

Date

03/13/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Aimee Furness 2

Contributor address;

City; State; Zip Code

1950 W. Colorado Blvd.

Dallas, TX 75208

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/22/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jane Gaines

Contributor address;

City; State; Zip Code

2136 Kessler Ct.

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/20/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carl Ginsberg

Contributor address;

City; State; Zip Code

2905 Wellborn St.

Dallas, TX 75219

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Mr Chad West

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

03/05/2021

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

John Gomez

6 Contributor address;

City; State; Zip Code

314 S. Winnetka Ave.

Dallas, TX 75208

7 Amount of contribution (\$)

100.00

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

Date

02/25/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Peter Granoff

Contributor address;

City; State; Zip Code

2207 Kessler Woods Ct.

Dallas, TX 75208

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/18/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Anne Hamilton

Contributor address;

City; State; Zip Code

5521 Swiss Ave.

Dallas, TX 75214

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/22/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Rhonda Harris

Contributor address;

City; State; Zip Code

2322 Kessler Pkwy

Dallas, TX 75208

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Mr Chad West

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

03/20/2021

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

Genifer Harrison

6 Contributor address;

City; State; Zip Code

617 S. Ravinia Dr.

Dallas, TX 75211

7 Amount of contribution (\$)

25.00

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

Date

02/11/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Daniel Huerta

Contributor address;

City; State; Zip Code

1414 Cedar Hill Ave.

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/05/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Charles Jones

Contributor address;

City; State; Zip Code

1029 Lausanne Ave

Dallas, TX 75208

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/26/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Eileen Josey

Contributor address;

City; State; Zip Code

P.O. Box 223567

Dallas, TX 75222

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**

The Instruction Guide explains how to complete this form.

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

Mr Chad West

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

02/20/2021

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

Michael Kaufman

6 Contributor address;

City; State; Zip Code

3731 Gilbert Ave.

Dallas, TX 75219

7 Amount of contribution (\$)

250.00

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

Date

01/22/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Scott Larsen

Contributor address;

City; State; Zip Code

665 Kessler Reserve Ct.

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Don Livingston

Contributor address;

City; State; Zip Code

6628 Bryant Irvin Rd.

Ft. Worth, TX 76132

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/03/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Stephen Long

Contributor address;

City; State; Zip Code

902 Thomasson Dr.

Dallas, TX 75208

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Mr Chad West

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

03/01/2021

Officeholder
Contribution**5** Full name of contributor

David Luther

☐ out-of-state PAC (ID#: _____)**6** Contributor address;

619 Kessler Spgs. Ave.

City; State; Zip Code

Dallas, TX 75208

7 Amount of contribution (\$)

100.00

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

Date

03/08/2021

Officeholder
Contribution

Full name of contributor

Beda Mast 2

☐ out-of-state PAC (ID#: _____)

Contributor address;

1224 Lausanne Ave.

City; State; Zip Code

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/05/2021

Officeholder
Contribution

Full name of contributor

James Mathis

☐ out-of-state PAC (ID#: _____)

Contributor address;

2029 W. Colorado Blvd.

City; State; Zip Code

Dallas, TX 75208

Amount of contribution (\$)

118.44

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2021

Officeholder
Contribution

Full name of contributor

Von McClure

☐ out-of-state PAC (ID#: _____)

Contributor address;

1603 Oak Knoll St.

City; State; Zip Code

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Mr Chad West

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

01/03/2021

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

Samuel McDonald

6 Contributor address;

City; State; Zip Code

2630 Shelby Ave.

Dallas, TX 75219

7 Amount of contribution (\$)

50.00

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

Date

03/08/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mark McPherson

Contributor address;

City; State; Zip Code

246 Waverly Dr.

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/11/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Micek

Contributor address;

City; State; Zip Code

426 Monte Vista Dr.

Dallas, TX 75223

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

J. Pierce Monkres

Contributor address;

City; State; Zip Code

1210 N. Clinton Ave

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Mr Chad West

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

01/11/2021

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

Michele Morgan

6 Contributor address;

City; State; Zip Code

631 S. Manus Dr.

Dallas, TX 75224

7 Amount of contribution (\$)

50.00

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

Date

03/02/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

DAVE NEUMANN

Contributor address;

City; State; Zip Code

6318 TURNER WAY

DALLAS, TX 75230

Amount of contribution (\$)

94.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/04/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Marilee OConnell

Contributor address;

City; State; Zip Code

634 Kessler Reserve Ct.

Dallas, TX 75208

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Steven Pounders

Contributor address;

City; State; Zip Code

3525 Turtle Creek Blvd.

Dallas, TX 75219

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Mr Chad West

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

03/01/2021

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

Dorotha Ocker

6 Contributor address;

City; State; Zip Code

1609 Marsh Ln.

Carrollton, TX 75006

7 Amount of contribution (\$)

237.20

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

Date

02/23/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris Peirson

Contributor address;

City; State; Zip Code

4400 Alpha Rd.

Dallas, TX 75244

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/01/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joel Perez

Contributor address;

City; State; Zip Code

1303 Lansford Ave.

Dallas, TX 75224

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/17/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Audrey Pinkerton

Contributor address;

City; State; Zip Code

434 W. Greenbriar Ln.

Dallas, TX 75208

Amount of contribution (\$)

474.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
12 of 17

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

02/10/2021

Officeholder
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Anjolie Ponce

6 Contributor address;

City; State; Zip Code

415 Allison Dr.

Dallas, TX 75208

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/22/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Wiley Price - Campaign

Contributor address;

City; State; Zip Code

510 E. 5th St.

Dallas, TX 75203

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/22/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Rawlings

Contributor address;

City; State; Zip Code

3879 Maple Ave.

Dallas, TX 75219

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/02/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Susan Reese

Contributor address;

City; State; Zip Code

8626 Douglas Ave.

Dallas, TX 75225

Amount of contribution (\$)

949.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Mr Chad West

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

03/10/2021

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

Judith Reid

6 Contributor address;

City; State; Zip Code

612 Spruce Ave.

Lake Forest, IL 60045

7 Amount of contribution (\$)

949.70

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

Date

02/02/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Denise Requardt

Contributor address;

City; State; Zip Code

708 Woolsey Dr.

Dallas, TX 75224

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amy Schaffner

Contributor address;

City; State; Zip Code

1622 Oak Knoll St.

Dallas, TX 75208

Amount of contribution (\$)

30.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/26/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Pat Schenkel

Contributor address;

City; State; Zip Code

614 N. Bishop Ave.

Dallas, TX 75208

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Mr Chad West

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

01/11/2021

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

Jon Bernard Schwartz

6 Contributor address;

City; State; Zip Code

308 N. Montclair Ave.

Dallas, TX 75208

7 Amount of contribution (\$)

50.00

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

Date

03/08/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joanna St. Angelo

Contributor address;

City; State; Zip Code

3221 Red Bird Ln.

Grapevine, TX 76051

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/01/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lisa Taylor

Contributor address;

City; State; Zip Code

923 Salmon Dr.

Dallas, TX 75208

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/02/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Rhonda Turner

Contributor address;

City; State; Zip Code

2830 W. Jefferson Blvd.

Dallas, TX 75211

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Mr Chad West

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

03/13/2021

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

Jesus Valadez

6 Contributor address;

City; State; Zip Code

717 W. Page Ave.

Dallas, TX 75208

7 Amount of contribution (\$)

25.00

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

Date

01/11/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brent Van Loggerenberg

Contributor address;

City; State; Zip Code

516 Monte Vista Dr.

Dallas, TX 75223

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/11/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Thea Van Loggerenberg

Contributor address;

City; State; Zip Code

516 Monte Vista Dr.

Dallas, TX 75223

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/09/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Daniel Waldmann

Contributor address;

City; State; Zip Code

1111 N. Montclair Ave.

Dallas, TX 75208

Amount of contribution (\$)

237.20

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Mr Chad West

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

01/19/2021

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

Alan Walne

6 Contributor address;

City; State; Zip Code

10020 Caribou Trail

Dallas, TX 75238

7 Amount of contribution (\$)

500.00

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

Date

01/04/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Teresa Wash 2

Contributor address;

City; State; Zip Code

420 Kearsarge St.

Desoto, TX 75115

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/16/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lawrence Worden

Contributor address;

City; State; Zip Code

2019 Old Orchard Dr.

Dallas, TX 75230

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2021

Officeholder
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Shannon Wyatt

Contributor address;

City; State; Zip Code

103 N. Winnetka Ave.

Dallas, TX 75208

Amount of contribution (\$)

237.20

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
17 of 17

2 FILER NAME

Mr Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

03/10/2021

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

AAGD

6 Contributor address;

City; State; Zip Code

5728 LBJ Freeway Suite 100

Dallas, TX 75240

7 Amount of contribution (\$)

1500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 16	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)			
4 Date 01/04/2021	5 Payee name Katy Seitzler				
6 Amount (\$) 480.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 217 Sycamore Creek Road Allen, TX 75002				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email marketing, Campaign Communications and Social Media			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;">Candidate / Officeholder name</td> <td style="width: 25%; text-align: center;">Office sought</td> <td style="width: 25%; text-align: center;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date 01/06/2021	Payee name Oak Cliff Lions Club				
Amount (\$) 25.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;">Candidate / Officeholder name</td> <td style="width: 25%; text-align: center;">Office sought</td> <td style="width: 25%; text-align: center;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date 01/06/2021	Payee name Jesse Perez				
Amount (\$) 30.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;">Candidate / Officeholder name</td> <td style="width: 25%; text-align: center;">Office sought</td> <td style="width: 25%; text-align: center;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5 of 16	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 02/09/2021	5 Payee name Benny Guzman	
6 Amount (\$) 150.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 306 South Montreal Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage Reimbursement
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/11/2021	Payee name Chad West PLLC	
Amount (\$) 31.27 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailchimp Reimbursement
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/12/2021	Payee name Edgar Johnson	
Amount (\$) 371.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 3636 West Redbird Lane Suite 821 Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6 of 16	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 02/18/2021	5 Payee name Oak Cliff Lions Club	
6 Amount (\$) 25.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/20/2021	Candidate / Officeholder name Roxanne Powell	
Amount (\$) 65.00 Officeholder Funds for Officeholder Expenditures	Office sought Payee address; City; State; Zip Code 808 Rutherford Road Waxahachie, TX 75165	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/20/2021	Candidate / Officeholder name Jocelyn Powell	
Amount (\$) 65.00 Officeholder Funds for Officeholder Expenditures	Office sought Payee address; City; State; Zip Code 808 Rutherford Road Waxahachie, TX 75165	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7 of 16	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 02/24/2021	5 Payee name Anthony Jaramillo	
6 Amount (\$) 168.75 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 2650 East Melissa Road Suite 626 Melissa, TX 75454	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/24/2021	Candidate / Officeholder name Roxanne Powell	
Amount (\$) 10.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 808 Rutherford Road Waxahachie, TX 75165	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/24/2021	Candidate / Officeholder name Jocelyn Powell	
Amount (\$) 10.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 808 Rutherford Road Waxahachie, TX 75165	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8 of 16	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 02/24/2021	5 Payee name Edgar Johnson	
6 Amount (\$) 67.50 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 3636 West Redbird Lane Suite 821 Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/01/2021	Candidate / Officeholder name Chad West PLLC	
Amount (\$) 31.26 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailchimp Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/02/2021	Candidate / Officeholder name Oak Cliff Lions Club	
Amount (\$) 25.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 10 of 16		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/05/2021		5 Payee name Katy Seitzler			
6 Amount (\$) 1393.50 Officeholder Funds for Officeholder Expenditures		7 Payee address; City; State; Zip Code 217 Sycamore Creek Road Allen, TX 75002			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email marketing, Campaign Communications and Social Media	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/05/2021		Payee name Edgar Johnson			
Amount (\$) 188.00 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 3636 West Redbird Lane Suite 821 Dallas, TX 75237			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/05/2021		Payee name Anthony Jaramillo			
Amount (\$) 210.00 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 2650 East Melissa Road Melissa, TX 75454			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12 of 16		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/10/2021		5 Payee name Chad West PLLC			
6 Amount (\$) 31.26 Officeholder Funds for Officeholder Expenditures		7 Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailchimp Reimbursement	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/10/2021		Payee name Liz Miller			
Amount (\$) 1000.00 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 1201 Bittern Drive Little Elm, TX 75068			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/10/2021		Payee name Anthony Jaramillo			
Amount (\$) 190.00 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 2650 East Melissa Road Suite 626 Melissa, TX 75454			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 13 of 16		2 FILER NAME Mr Chad West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/10/2021		5 Payee name AAGD			
6 Amount (\$) 1000.00 Officeholder Funds for Officeholder Expenditures		7 Payee address; City; State; Zip Code 5728 LBJ Freeway Suite 100 Dallas, TX 75240			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Reimbursement		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for donation overage	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/11/2021		Payee name Chad West			
Amount (\$) 1108.79 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Reimbursement		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for marketing materials	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/11/2021		Payee name Qualigraphics, Inc			
Amount (\$) 1980.73 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Door Hangers	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 15 of 16	2 FILER NAME Mr Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 03/18/2021	5 Payee name Benjamin Calhoun	
6 Amount (\$) 190.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 2650 East Melissa Road Suite 626 Melissa, TX 75454	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date 03/18/2021	Payee name Darnella Wilson	
Amount (\$) 137.50 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 9747 Whitehurst Drive Suite 80 Dallas, TX 75243	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date 03/18/2021	Payee name Liz Miller	
Amount (\$) 1000.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1201 Bittern Drive Little Elm, TX 75068	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Help
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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