

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:

78

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

Mr

Chad

A

NICKNAME

LAST

SUFFIX

West

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

3606 S Tyler

Dallas TX 75224

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214)

406 7861

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Mr

Benny

NICKNAME

LAST

SUFFIX

Guzman

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

1147 N Madison

Dallas TX 75208

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214)

431 9494

9 REPORT TYPE

☐ January 15

☒ 30th day before election

☐ Runoff

☐ 15th day after campaign
treasurer appointment
(Officeholder Only)

☐ July 15

☐ 8th day before election

☐ Exceeded \$500 limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

01

01

2019

THROUGH

Month

Day

Year

03

25

2019

11 ELECTION

ELECTION DATE

Month

Day

Year

/ /

☐ Primary

☐ Runoff

☐ Other
Description

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Council District 1

GO TO PAGE 2

FORM C/OH
COVER SHEET PG 2

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

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME
Mr Chad A West

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 51,245.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 510.00
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	\$ 32,706.01
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 45**2** FILER NAME

Mr Chad A West

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

01/17/2019

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

Johnny Aguinaga 2

6 Contributor address;

City; State; Zip Code

3608 Granada Ave.

Dallas, TX 75205

7 Amount of contribution (\$)

250.00

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

Date

01/31/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Guy Albright

Contributor address;

City; State; Zip Code

717 Bizerte Ave.

Dallas, TX 75224

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Wick Allison

Contributor address;

City; State; Zip Code

750 N. St. Paul Suite 2100

Dallas, TX 75201

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/28/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Amonett

Contributor address;

City; State; Zip Code

2210 W. 10th St.

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:
2 of 45**2** FILER NAME

Mr Chad A West

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

02/09/2019

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

Allison Anderson

7 Amount of contribution (\$)

25.00

6 Contributor address;

City; State; Zip Code

7620 Dunoon Ave.

Dallas, TX 75248

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

Date

01/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carl Anderson

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

2929 Carlisle St. Suite 210

Dallas, TX 75204

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

JD Angle

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

2420 S. Adams St.

Ft. Worth, TX 76110

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/31/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Stan Aten 2

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

3165 O'Bannon Dr.

Dallas, TX 75224

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 45**2** FILER NAME

Mr Chad A West

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

01/10/2019

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

Michael AuBuchon

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

1113 N. Canterbury Ct.

Dallas, TX 75208

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

Date

03/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lisa Baron

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

25 Highland Park Village

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/07/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jaret Barter

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

721 Mayrant Dr.

Dallas, TX 75224

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jeffrey Baustert

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

935 N. Windomere Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 45**2** FILER NAME

Mr Chad A West

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

02/25/2019

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

John H. Beaugh, Jr.

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

2518 Wedglea Dr.

Dallas, TX 75211

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

Date

03/23/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chad Benedict

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

P.O. Box 190653

Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dustin Benham

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

2905 21st St.

Lubbock, TX 79410

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/07/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Steve Bossay

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

322 S. Rosemont Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
5 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date

03/11/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tony Brogan

6 Contributor address;

City; State; Zip Code

225 N. Rosemont Ave.

Dallas, TX 75208

7 Amount of contribution (\$)

50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Becky Brown

Contributor address;

City; State; Zip Code

2313 Elmwood Blvd.

Dallas, TX 75224

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Suzanne Buss

Contributor address;

City; State; Zip Code

653 Culpepper Place

Dallas, TX 75208

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lisa 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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
6 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date
03/20/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Frank Carabetta

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

4067 Northview Ln.

Dallas, TX 75229

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
01/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Deborah Carpenter

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

2009 Neal St.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/22/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Cody Cofer

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

2502 6th Ave.

Fort Worth, TX 76110

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/31/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Janice Coffee

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

732 Mayrant Dr.

Dallas, TX 75224

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 45**2** FILER NAME

Mr Chad A West

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

03/21/2019

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

Glenn Comtois

7 Amount of contribution (\$)

150.00

6 Contributor address;

City; State; Zip Code

2237 Stevens Woods Ln.

Dallas, TX 75208

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

Date

03/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

George Conklin

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

402 N. Rosemont Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Becky Connatser 2

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

815 W. Greenbriar Ln.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Keith Cornwell

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

1122 Elmhurst Place

Dallas, TX 75224

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 45**2** FILER NAME

Mr Chad A West

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

02/21/2019

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

John Cox

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

1033 N. Plymouth Rd.

Dallas, TX 75208

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

Date

03/24/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Anthony Cuevas

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1619 Sylvan Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/24/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris Culak

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1223 Kings Hwy.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/24/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Leo Cusimano

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1619 Sylvan Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
9 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date
03/25/2019

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

Giles Davidson

6 Contributor address; City; State; Zip Code

1111 N. Montclair Ave. Dallas, TX 75208

7 Amount of contribution (\$)
500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
01/26/2019

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

Amy E. Davis 2

Contributor address; City; State; Zip Code

222 N. Rosemont Ave. Dallas, TX 75208

Amount of contribution (\$)
200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/25/2019

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

David Dean

Contributor address; City; State; Zip Code

P.O. Box 140039 Dallas, TX 75214

Amount of contribution (\$)
1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/25/2019

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

Ian Delahunty

Contributor address; City; State; Zip Code

1547 Eastus Dr. Dallas, TX 75208

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:
10 of 45**2** FILER NAME

Mr Chad A West

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

02/24/2019

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

Paul Dickel

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

1303 Cedar Hill Ave.

Dallas, TX 75208

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

Date

02/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chad Dolezal

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

101 S. Winnetka Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Driscoll

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

1926 Mayflower Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kate Dunham

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

2119 Carlton Rd.

Carrollton, TX 75007

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 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date

03/12/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brian Edwards

6 Contributor address;

City; State; Zip Code

314 N. Montclair Ave.

Dallas, TX 75208

7 Amount of contribution (\$)

50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Alex Fitzgerald

Contributor address;

City; State; Zip Code

4725 Fairmount St. Suite 113

Dallas, TX 75219

Amount of contribution (\$)

60.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ellen Fitzsimmons

Contributor address;

City; State; Zip Code

1135 N. Winnetka Ave.

Dallas, TX 75208

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/24/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Flores

Contributor address;

City; State; Zip Code

110 N. Montclair Ave.

Dallas, TX 75208

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
12 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date

01/01/2019

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

Aimee Furness

7 Amount of contribution (\$)

1000.00

6 Contributor address; City; State; Zip Code

1950 W. Colorado Blvd. Dallas, TX 75208

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

01/07/2019

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

Sandy Garland

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

147 S. Crestview Dr. Paducah, KY 42003

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/03/2019

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

Jake Gilbreath

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

4110 Shoal Ck. Blvd. Austin, TX 78756

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/26/2019

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

Joseph Glogowski

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code

9738 Amberley Dr. Dallas, TX 75243

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
13 of 45**2** FILER NAME

Mr Chad A West

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

01/25/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Julio Gonzalez

6 Contributor address;

City; State; Zip Code

824 Salmon Dr.

Dallas, TX 75208

7 Amount of contribution (\$)

100.00

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

01/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kim Green

Contributor address;

City; State; Zip Code

2222 Elmwood Blvd.

Dallas, TX 75224

Amount of contribution (\$)

150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Judy Gremm

Contributor address;

City; State; Zip Code

3525 Turtle Ck. Blvd. Suite 21-B Dallas, TX 75219

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jennifer Guyot

Contributor address;

City; State; Zip Code

10007 Woodlake Dr.

Dallas, TX 75243

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**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
14 of 45**2** FILER NAME

Mr Chad A West

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

01/02/2019

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

Shea Haass

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

3699 McKinney Ave. Suite 489D Dallas, TX 75204

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

Date

03/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Anne Hagan

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

204 S. Willomet Ave. Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/24/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jack Hagler

Amount of contribution (\$)

75.00

Contributor address;

City; State; Zip Code

417 N. Montclair Ave. Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ellie Hajek

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1800 Marydale Dr. Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
15 of 45**2** FILER NAME

Mr Chad A West

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

03/01/2019

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

Barry Hancock

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

4525 Travis St. Suite 326

Dallas, TX 75205

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

Date

03/12/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Hansen

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

1030 Lausanne Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/19/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Rhonda Heatly

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

2040 Kessler Pkwy

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brian Higginbotham

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

5614 Goodwin Ave.

Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
16 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date
03/12/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Scott Hounsel

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

308 S. Windomere

Dallas, TX 75208

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Augustine Jalomo 2

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

607 West Canty St.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mary Ann Jenkins

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

744 S. Manus Dr.

Dallas, TX 75224

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/18/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amanda Johnson

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

826 Tarryall Dr.

Dallas, TX 75224

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 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date

03/07/2019

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

Charlie Jones

6 Contributor address; City; State; Zip Code

1029 Lausanne Ave. Dallas, TX 75208

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/15/2019

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

Glen Jones

Contributor address; City; State; Zip Code

418 N. Rosemont Ave. Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/11/2019

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

Suzy Juncker

Contributor address; City; State; Zip Code

1818 Mayflower Dr. Dallas, TX 75208

Amount of contribution (\$)

20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/24/2019

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

Michael Kaufman

Contributor address; City; State; Zip Code

3731 Gilbert Ave. Suite C Dallas, TX 75219

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:
18 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date
03/21/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Geoff Kay

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

1014 Evergreen Hills Rd.

Dallas, TX 75208

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
01/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Melissa Kingston

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

5901 Palo Pinto Ave.

Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/13/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Wendy Krispin

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

528 S. Hall St.

Dallas, TX 75226

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robin Lane

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

1512 Eastus Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
19 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date
03/21/2019

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

Elaine Lantz

7 Amount of contribution (\$)

100.00

6 Contributor address; City; State; Zip Code

818 Elsbeth Dallas, TX 75208

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
01/17/2019

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

Thomas Leatherbury

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code

4430 Woodfin Dr. Dallas, TX 75220

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/11/2019

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

Amy Lee

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code

2015 W. Colorado Blvd. Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/21/2019

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

Steve Levine

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

1640 Sylvan Ave. Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
20 of 45**2** FILER NAME

Mr Chad A West

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

02/22/2019

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

Kathryn Long

6 Contributor address;

City; State; Zip Code

1674 Kessler Canyon Dr.

Dallas, TX 75208

7 Amount of contribution (\$)

250.00

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

Date

01/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Francis Luttmmer

Contributor address;

City; State; Zip Code

6941 Desco Dr.

Dallas, TX 75225

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bryan Maggio

Contributor address;

City; State; Zip Code

939 Knott Place

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/12/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Charles D. Marlett

Contributor address;

City; State; Zip Code

4005 Dunhaven Rd.

Dallas, TX 75220

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**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
21 of 45**2** FILER NAME

Mr Chad A West

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

03/14/2019

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

Thomas Marshall

7 Amount of contribution (\$)

200.00

6 Contributor address;

City; State; Zip Code

930 Salmon Dr.

Dallas, TX 75208

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

Date

03/10/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Casey Martin

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

2110 Kessler Ct. Suite 73

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/24/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Keith Marton

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

1211 N. Winnetka Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/29/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joseph Marts

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

646 Monssen Dr.

Dallas, TX 75224

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:
22 of 45**2** FILER NAME

Mr Chad A West

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

03/21/2019

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

Beda Mast

7 Amount of contribution (\$)

450.00

6 Contributor address;

City; State; Zip Code

1224 Lausanne Ave.

Dallas, TX 75208

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

Date

01/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Shane Masterman

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

914 Stevens Woods Ct.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James Mathis

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

2029 W. Colorado Blvd.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brian Maynard

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

1906 Marydale Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
23 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date
01/23/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

John McCall, Jr.

6 Contributor address;

City; State; Zip Code

1650 Oak Knoll St.

Dallas, TX 75208

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/27/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John McCall, Jr. 2

Contributor address;

City; State; Zip Code

918 W. Commerce St.

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joe McElroy

Contributor address;

City; State; Zip Code

1207 Eldorado Ave.

Dallas, TX 75208

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mike McKay

Contributor address;

City; State; Zip Code

2535 Wedglea Dr. Suite 219

Dallas, TX 75211

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:
24 of 45**2** FILER NAME

Mr Chad A West

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

02/15/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Jill McLaren

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

6051 Kenwood Ave.

Dallas, TX 75206

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

Date

03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Susan Melnick

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

2316 Kessler Pkwy

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Beverly Mendoza

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

520 E. 5th St.

Dallas, TX 75203

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/26/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lynne Merlino

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

215 W. Greenbriar Ln.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
25 of 45**2** FILER NAME

Mr Chad A West

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

03/10/2019

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

Arlen Miller

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

2020 Marydale Dr.

Dallas, TX 75208

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

Date

01/18/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Linda Moore

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

6627 Robin Rd.

Dallas, TX 75209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Andrew Morris

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

831 Shady Ln.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Farrokh Nazerian

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1978 Mission Ridge Rd.

Santa Barbara, CA 93103

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:
26 of 45**2** FILER NAME

Mr Chad A West

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

03/25/2019

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

Milad Nazerian

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

4113 Buena Vista St.

Dallas, TX 75204

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

Date

03/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sally Nazerian

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1978 Mission Ridge Rd.

Santa Barbara, CA 93103

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bill Neill

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

2210 Kessler Pkwy

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/22/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Frank Nucheren

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

4310 Nashwood Ln.

Dallas, TX 75244

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:
27 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date

01/27/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Charles O Connell

6 Contributor address;

City; State; Zip Code

6346 Kessler Reserve Ct.

Dallas, TX 75208

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

01/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jay Oppenheimer

Contributor address;

City; State; Zip Code

3510 Turtle Creek Blvd. Suite 12D Dallas, TX 75219

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Randy Osteen 2

Contributor address;

City; State; Zip Code

1232 Lausanne Ave.

Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jennifer Owen

Contributor address;

City; State; Zip Code

6541 Arborist Ln.

Dallas, TX 75214

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:
28 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date
02/21/2019

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

6 Contributor address; City; State; Zip Code
3210 Carlisle St. Suite 1 Dallas, TX 75204

7 Amount of contribution (\$)
1000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
01/16/2019

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

Contributor address; City; State; Zip Code
2029 Mayflower Dr. Dallas, TX 75208

Amount of contribution (\$)
250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/17/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Dr. Eric Peay

Contributor address; City; State; Zip Code
3500 Oak Lawn Ave. Suite 650 Dallas, TX 75219

Amount of contribution (\$)
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/16/2019

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

Contributor address; City; State; Zip Code
410 E. 5th St. Dallas, TX 75203

Amount of contribution (\$)
20.00

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:
29 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date
03/22/2019

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

Lucilo Pena 2

6 Contributor address; City; State; Zip Code

1717 Arts Plaza Suite 2311 Dallas, TX 75201

7 Amount of contribution (\$)
250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/21/2019

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

Dee Pennington

Contributor address; City; State; Zip Code

3670 Cripple Creek Dr. Dallas, TX 75202

Amount of contribution (\$)
200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/18/2019

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

Charlie Perdue

Contributor address; City; State; Zip Code

306 W. 8th St. Dallas, TX 75208

Amount of contribution (\$)
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/11/2019

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

Cindy Pierce

Contributor address; City; State; Zip Code

811 W. Greenbriar Ln. Dallas, TX 75208

Amount of contribution (\$)
35.00

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:
30 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date
03/19/2019

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

Amanda Popken

7 Amount of contribution (\$)

25.00

6 Contributor address; City; State; Zip Code

2519 Catherine St. Dallas, TX 75211

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
01/20/2019

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

David Preziosi

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

2229 Lawndale Dr. Dallas, TX 75211

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/22/2019

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

Natalie Pruitt

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

420 Allison Dr. Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/21/2019

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

Gabor Racz

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code

702 Rainbow Dr. Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
31 of 45**2** FILER NAME

Mr Chad A West

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

02/27/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Dee Ann Rath

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

951 Turner Ave.

Dallas, TX 75208

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

02/27/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Randy Rath

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

951 Turner Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/03/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James Rea

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1534 Junior Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/19/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Susan Read

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

P.O. Box 541761

Grand Prairie, TX 75054

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:
32 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date
03/22/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bruce Reid

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

1603 Orrington Ave.

Evanston, IL 60201

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gay J. Revi

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

2522 Ft. Worth Ave. Suite 222

Dallas, TX 75211

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Rieger

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

196 Cove Dr.

Coppell, TX 75019

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mark Rieves

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

5530 Goodwin Ave.

Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
33 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date

01/16/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Louis Salcedo

6 Contributor address;

City; State; Zip Code

3 Richmond Ct.

Mansfield, TX 76063

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/10/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tanner Sarvis

Contributor address;

City; State; Zip Code

150 Nichols Hwy. So.

Nichols, SC 29581

Amount of contribution (\$)

20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Craig Schenkel

Contributor address;

City; State; Zip Code

614 N. Bishop Ave. Suite 3

Dallas, TX 75208

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Pete Schenkel

Contributor address;

City; State; Zip Code

614 N. Bishop Ave. Suite 3

Dallas, TX 75208

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
34 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date

01/16/2019

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

Jaynie Schultz

7 Amount of contribution (\$)

100.00

6 Contributor address; City; State; Zip Code

11222 St. Michaels Dr. Dallas, TX 75230

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

01/17/2019

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

Ron Schulz

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

3817 Gilbert Ave. Suite 106 Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/17/2019

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

Raymond Scott

Amount of contribution (\$)

150.00

Contributor address; City; State; Zip Code

4144 N. Central Expwy. Suite 240 Dallas, TX 75204

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/05/2019

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

Matt Segrest

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code

3012 Fairmount St. Suite 100 Dallas, TX 75201

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:
35 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date
03/07/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Diane Sherman

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

107 N. Clinton Ave.

Dallas, TX 75208

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Larry Shinkaruk

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

802 Haines Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ashley Shultz

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

531 Monssen Dr.

Dallas, TX 75224

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/28/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dave Smades

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

732 Kessler Lake Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
36 of 45**2** FILER NAME

Mr Chad A West

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

03/18/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Neil Smith

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

1803 W. Colorado Blvd.

Dallas, TX 75208

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

01/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Charles Soechting, Jr.

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

726 N. Windomere Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carole Somers

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1131 N. Plymouth Rd.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Stephen Springfield

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

1503 Eastus Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
37 of 45**2** FILER NAME

Mr Chad A West

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

03/24/2019

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

Daniel Stewart

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

17309 Stedman Cir.

Dallas, TX 75252

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

Date

01/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dr. Kevin Terrell

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

2603 Oak Lawn Ave. Suite 100

Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Shawn Terry

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

3130 N. Harwood Suite 1001

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robert Thaggard

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

443 Allison Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
38 of 45**2** FILER NAME

Mr Chad A West

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

01/16/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Terry Thomas

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

732 Mayrant Dr.

Dallas, TX 75224

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

Date

02/07/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Scott Thompson

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

311 N. Montclair Ave.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/23/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Russell Thompson 2

Amount of contribution (\$)

400.00

Contributor address;

City; State; Zip Code

1414 Dominion St.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jonathan Thorne

Amount of contribution (\$)

10.00

Contributor address;

City; State; Zip Code

834 N. Marsallis Ave. Suite 113

Dallas, TX 75203

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:
39 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date

03/14/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jonathan Thorne 2

6 Contributor address;

City; State; Zip Code

834 N. Marsallis Ave. Suite 113 Dallas, TX 75203

7 Amount of contribution (\$)

5.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jef Tingley

Contributor address;

City; State; Zip Code

811 Stewart Dr. Dallas, TX 75208

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/31/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Caleb Trotter

Contributor address;

City; State; Zip Code

622 Mayrant Dr. Dallas, TX 75224

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Aleco Tujios

Contributor address;

City; State; Zip Code

2901 Amherst Ave. Dallas, TX 75225

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.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
40 of 45**2** FILER NAME

Mr Chad A West

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

02/05/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Jesus Valadez

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

717 W. Page Ave.

Dallas, TX 75208

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

Date

01/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Veale

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1717 Arts Plaza Suite 2207

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bill Velasco

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1104 W. Jefferson Blvd.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/19/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Reagan Vernon

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

931 Stewart Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
41 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date

01/02/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brian Walker

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

934 Turner Ave.

Dallas, TX 75208

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

01/10/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Logan Waller

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

5115 McKinney Ave. Suite F

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/10/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kathryn Warren

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

2037 Mayflower Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/19/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Roger Wedell

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1318 Elmwood Blvd.

Dallas, TX 75224

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:
42 of 45**2** FILER NAME

Mr Chad A West

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

03/15/2019

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

Tammy Weiss

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

122 N. Clinton Ave

Dallas, TX 75208

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

Date

01/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Natalie West

Amount of contribution (\$)

75.00

Contributor address;

City; State; Zip Code

92 Dalecrest Ln.

Gilbertsville, KY 42044

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Randall White

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

1939 Mayflower Dr.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Russ White

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1450 La Senda Pl.

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
43 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date

01/10/2019

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

Sterling White

6 Contributor address; City; State; Zip Code

11557 Snyder Dr. Frisco, TX 75035

7 Amount of contribution (\$)

150.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/20/2019

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

Cindy Whitney

Contributor address; City; State; Zip Code

1652 Sylvan Ave. Dallas, TX 75208

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/20/2019

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

Joe Whitney

Contributor address; City; State; Zip Code

1652 Sylvan Ave. Dallas, TX 75208

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/11/2019

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

Emily Whittington

Contributor address; City; State; Zip Code

1039 N. Oak Cliff Blvd. Dallas, TX 75208

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
44 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date
01/03/2019

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

Valerie Wilde

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
6004 Green Forest Ct. Arlington, TX 76004

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/07/2019

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

Doreen Williams

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
2164 Kessler Ct. Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/09/2019

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

Paul Wingo

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
1227 Woodlawn Ave. Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/17/2019

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

Grant Woodruff

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
4848 Lemmon Ave. Suite 106 Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
45 of 45

2 FILER NAME

Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date
02/25/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robert Wright

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

1150 N. Winnetka Ave.

Dallas, TX 75208

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
01/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Steven Wright

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

7421 Sabine Dr.

McKinney, TX 75071

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Alice Zaccarello

Amount of contribution (\$)

75.00

Contributor address;

City; State; Zip Code

2243 Lawndale Dr.

Dallas, TX 75211

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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:
1 of 1

2 FILER NAME
Mr Chad A West

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date
01/15/2019

6 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Becky Moffett Becky Moffett

7 Contributor address; City; State; Zip Code
835 Stevens Woods Ct Dallas, TX 75208

8 Amount of Contribution \$
510.00

9 In-kind contribution description
Campaign Cups

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

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

Amount of Contribution \$

In-kind contribution description

Contributor address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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 29		2 FILER NAME Mr Chad A West		3 Filer ID (Ethics Commission Filers)	
4 Date 01/24/2019		5 Payee name MailChimp			
6 Amount (\$) 26.65		7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Suite 6000 30308			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Newsletter	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/04/2019		Payee name K&R Screen Graphics			
Amount (\$) 1568.55		Payee address; City; State; Zip Code 3915 Main St Dallas, TX 75226			
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 Signs	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/28/2019		Payee name MailChimp			
Amount (\$) 26.65		Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Suite 6000 30308			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newsletter	
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: 2 of 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 01/09/2019	5 Payee name The Event Helper	
6 Amount (\$) 126.21	7 Payee address; City; State; Zip Code 1020 McCourtney Rd Sugar Valley, CA 95949	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Event Insurance
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 01/02/2019	Payee name Katy Seitzler	
Amount (\$) 365.00	Payee address; City; State; Zip Code 217 Sycamore Creek Road Allen, TX 75002	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newsletter Design
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 01/10/2019	Payee name Tacos Y Vino	
Amount (\$) 500.00	Payee address; City; State; Zip Code 213 West 8th St Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Launch Party
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

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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 29		2 FILER NAME Mr Chad A West		3 Filer ID (Ethics Commission Filers)	
4 Date 01/15/2019		5 Payee name Robert Rojas K&R Screen Graphics			
6 Amount (\$) 790.22		7 Payee address; City; State; Zip Code 3915 Main St Dallas, TX 75226			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Printing expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 01/16/2019		Payee name K&R Screen Graphics			
Amount (\$) 1568.54		Payee address; City; State; Zip Code 3915 Main St Dallas, TX 75226			
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 Printing expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 01/18/2019		Payee name Home Depot #0552			
Amount (\$) 164.69		Payee address; City; State; Zip Code 2901 West Wheatland RdDallas, TX 75237			
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 Large Sign Materials	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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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 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 01/11/2019	5 Payee name Qualigraphics	
6 Amount (\$) 366.75	7 Payee address; City; State; Zip Code 2909 Cole Ave Suite 300 Dallas, TX 75204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printed Materials
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/14/2019	Candidate / Officeholder name Payee name Qualigraphics	
Amount (\$) 1061.94	Payee address; City; State; Zip Code 2909 Cole Ave Suite 300 Dallas, TX 75204	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Buttons
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/16/2019	Candidate / Officeholder name Payee name Ben Coleman Band	
Amount (\$) 100.00	Payee address; City; State; Zip Code 935 Stevens Woods Court Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Band for Launch Party
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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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 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 01/24/2019	5 Payee name Home Depot #0552	
6 Amount (\$) 77.63	7 Payee address; City; State; Zip Code 2901 West Wheatland RdDallas, TX 75237	
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 Sign Materials
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/23/2019	Candidate / Officeholder name Office sought Office held	
Payee name Maria Ecotino	Payee address; City; State; Zip Code 12900 Preston Rd Dallas, TX 75230	
Amount (\$) 2000.00	Category (See Categories listed at the top of this schedule) Advertising Expense	
PURPOSE OF EXPENDITURE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/16/2019	Candidate / Officeholder name Office sought Office held	
Payee name Becky Moffett	Payee address; City; State; Zip Code 935 Stevens Woods CourtDallas, TX 75208	
Amount (\$) 280.30	Category (See Categories listed at the top of this schedule) Event Expense	
PURPOSE OF EXPENDITURE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ice & Balloons for Launch Party	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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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 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 01/18/2019	5 Payee name Qualigraphics	
6 Amount (\$) 132.35	7 Payee address; City; State; Zip Code 2909 Cole Ave Suite 300 Dallas, TX 75204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Push Cards
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/22/2019	Candidate / Officeholder name Becky Moffett	
Amount (\$) 200.25	Office sought Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Keg for launch party
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/24/2019	Candidate / Officeholder name Joshua Miller	
Amount (\$) 244.00	Office sought Office held	
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 Sign Installs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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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 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 01/30/2019	5 Payee name Joshua Miller	
6 Amount (\$) 101.00	7 Payee address; City; State; Zip Code 13700 CF Hawn Freeway Dallas, TX 75253	
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 Sign Installs
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 01/31/2019	Payee name Oddfellows	
Amount (\$) 353.96	Payee address; City; State; Zip Code 316 West 7th St Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal for Blockwalkers and Volunteers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 02/01/2019	Payee name Susan Craig	
Amount (\$) 200.00	Payee address; City; State; Zip Code 2511 Wedglea Dr Suite 500 Dallas, TX 75211	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Blockwalker
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8 of 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 02/04/2019	5 Payee name Home Depot	
6 Amount (\$) 48.52	7 Payee address; City; State; Zip Code 2901 West Wheatland RdDallas, TX 75237	
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 Sign Materials
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date 02/06/2019	Payee name Small Brewpub	
Amount (\$) 10.74	Payee address; City; State; Zip Code 333 West Jefferson BlvdDallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate Forum/Meet & Greet
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date 02/06/2019	Payee name Small Brewpub	
Amount (\$) 10.74	Payee address; City; State; Zip Code 333 West Jefferson BlvdDallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate Forum/Meet & Greet
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: 9 of 29		2 FILER NAME Mr Chad A West		3 Filer ID (Ethics Commission Filers)	
4 Date 02/05/2019		5 Payee name Susan Craig			
6 Amount (\$) 500.00		7 Payee address; City; State; Zip Code 2511 Wedglea Dr Suite 500 Dallas, TX 75211			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Blockwalker	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/07/2019		Payee name Big Frog Custom Tshirts			
Amount (\$) 220.56		Payee address; City; State; Zip Code 322 West Davis St Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Tshirts	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/10/2019		Payee name Peaberry Coffee			
Amount (\$) 8.58		Payee address; City; State; Zip Code 2446 W. Kiest Blvd Dallas, TX 75233			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Girl Scout Cookies	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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 29		2 FILER NAME Mr Chad A West		3 Filer ID (Ethics Commission Filers)	
4 Date 02/10/2019		5 Payee name Amazon			
6 Amount (\$) 63.58		7 Payee address; City; State; Zip Code 1200 12th Ave South Suite 100 Seattle, WA 98144			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Mailing supplies	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/12/2019		Payee name Chad West, PLLC			
Amount (\$) 358.58		Payee address; City; State; Zip Code 3606 S Tyler St Dallas, TX 75224			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Reimbursement for campaign volunteers	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/08/2019		Payee name Arts Mission Oak Cliff			
Amount (\$) 550.00		Payee address; City; State; Zip Code 410 Windomere Ave Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Venue Rental	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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 29		2 FILER NAME Mr Chad A West		3 Filer ID (Ethics Commission Filers)	
4 Date 02/14/2019		5 Payee name Texas Theatre			
6 Amount (\$) 13.50		7 Payee address; City; State; Zip Code 231 W Jefferson Blvd Dallas, TX 75208			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 Ticket for event	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/14/2019		Payee name Texas Theatre			
Amount (\$) 13.50		Payee address; City; State; Zip Code 231 W Jefferson Blvd Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ticket for event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/14/2019		Payee name Office Max			
Amount (\$) 193.22		Payee address; City; State; Zip Code 2415 North Haskell Dallas, TX 75204			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 02/04/2019	5 Payee name Qualigraphics	
6 Amount (\$) 659.02	7 Payee address; City; State; Zip Code 2909 Cole Ave Suite 300 Dallas, TX 75204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Printed Materials
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 02/07/2019	Payee name Qualigraphics	
Amount (\$) 1451.46	Payee address; City; State; Zip Code 2909 Cole Ave Suite 300 Dallas, TX 75204	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printed Materials
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 02/14/2019	Payee name Savor Gastro Pub	
Amount (\$) 18.07	Payee address; City; State; Zip Code 2000 Woodall Rodgers F Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Special event lunch
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

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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 29		2 FILER NAME Mr Chad A West		3 Filer ID (Ethics Commission Filers)	
4 Date 02/14/2019		5 Payee name Savor Gastro Pub			
6 Amount (\$) 78.03		7 Payee address; City; State; Zip Code 2000 Woodall Rodgers Fy Dallas, TX 75201			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Special event lunch	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/15/2019		Payee name K&R Screen Graphics			
Amount (\$) 1568.55		Payee address; City; State; Zip Code 3915 Main St Dallas, TX 75226			
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 Signs	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/20/2019		Payee name Home Depot			
Amount (\$) 28.64		Payee address; City; State; Zip Code 2901 West Wheatland Rd Dallas, TX 75237			
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 Sign Materials	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 14 of 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 02/21/2019	5 Payee name The Common Table	
6 Amount (\$) 10.74	7 Payee address; City; State; Zip Code 2917 Fairmount St Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Scott Griggs Fundraiser
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/05/2019	Candidate / Officeholder name Susanna James	
Amount (\$) 68.20	Office sought Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimburse for Donuts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/21/2019	Candidate / Officeholder name K&R Screen Graphics	
Amount (\$) 1568.54	Office sought Office held	
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 Signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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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 29		2 FILER NAME Mr Chad A West		3 Filer ID (Ethics Commission Filers)	
4 Date 02/26/2019		5 Payee name The Kessler School			
6 Amount (\$) 1000.00		7 Payee address; City; State; Zip Code 1215 Turner Ave Dallas, TX 75208			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations		(b) Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Spring Auction Donation	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/27/2019		Payee name Home Depot			
Amount (\$) 97.04		Payee address; City; State; Zip Code 2901 West Wheatland Rd Dallas, TX 75237			
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 Sign Materials	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/01/2019		Payee name Chad West, PLLC			
Amount (\$) 400.02		Payee address; City; State; Zip Code 3606 S Tyler St Dallas, TX 75224			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		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 campaign block walkers	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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 29		2 FILER NAME Mr Chad A West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/01/2019		5 Payee name Goody Goody Liquor			
6 Amount (\$) 91.98		7 Payee address; City; State; Zip Code 3316 Oak Lawn Ave Dallas, TX 75219			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 Gifts for Campaign Event Hosts	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/01/2019		Payee name Qualigraphics			
Amount (\$) 322.25		Payee address; City; State; Zip Code 2909 Cole Ave Suite 300 Dallas, TX 75204			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printed Materials	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/21/2019		Payee name Katy Seitzler			
Amount (\$) 829.76		Payee address; City; State; Zip Code 217 Sycamore Creek Road Allen, TX 75002			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newsletter Management	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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: 17 of 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 02/27/2019	5 Payee name Joshua Miller	
6 Amount (\$) 214.00	7 Payee address; City; State; Zip Code 13700 CF Hawn Freeway Dallas, TX 75253	
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 Sign Installs
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 03/04/2019	Payee name ABC Party Headquarters	
Amount (\$) 60.00	Payee address; City; State; Zip Code 1414 W Davis St Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parade Materials
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 03/03/2019	Payee name ABC Party Headquarters	
Amount (\$) 60.00	Payee address; City; State; Zip Code 1414 W Davis St Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parade Materials
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

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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: 18 of 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 03/04/2019	5 Payee name Enos Pizza Tavern	
6 Amount (\$) 256.50	7 Payee address; City; State; Zip Code 407 N Bishop Ave Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Mardi Gras Parade Volunteer Party
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/25/2019	Payee name K&R Screen Graphics	
Amount (\$) 135.31	Payee address; City; State; Zip Code 3915 Main St Dallas, TX 75226	
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 Printed Materials
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/01/2019	Payee name Susan Craig	
Amount (\$) 500.00	Payee address; City; State; Zip Code 2511 Wedglea Dr Suite 500 Dallas, TX 75211	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Blockwalker
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
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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: 19 of 29		2 FILER NAME Mr Chad A West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/05/2019		5 Payee name CFW Parking Meter			
6 Amount (\$) 3.00		7 Payee address; City; State; Zip Code 305 Main St Fort Worth, TX 76102			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Parking	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/06/2019		Payee name Glorias			
Amount (\$) 28.82		Payee address; City; State; Zip Code 600 N Bishop Ave Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stuart Rosenberg Campaign Consultant	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/08/2019		Payee name Crescent Hotel Food & Beverage			
Amount (\$) 2.65		Payee address; City; State; Zip Code 400 Crescent Ct Dallas, TX 75201			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dallas Breakfast Group Meeting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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: 20 of 29		2 FILER NAME Mr Chad A West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/08/2019		5 Payee name Crescent Hotel Food & Beverage			
6 Amount (\$) 9.63		7 Payee address; City; State; Zip Code 400 Crescent Ct Dallas, TX 75201			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Dallas Breakfast Group Meeting	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
Date 03/08/2019		Payee name Home Depot			
Amount (\$) 58.22		Payee address; City; State; Zip Code 2901 West Wheatland Rd Dallas, TX 75237			
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 Sign Materials	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
Date 02/27/2019		Payee name Qualigraphics			
Amount (\$) 297.47		Payee address; City; State; Zip Code 2909 Cole Ave Suite 300 Dallas, TX 75204			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Stickers	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					

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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: 21 of 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 03/04/2019	5 Payee name Katy Seitzler	
6 Amount (\$) 775.00	7 Payee address; City; State; Zip Code 217 Sycamore Creek Road Allen, TX 75002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Graphics
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 03/08/2019	Payee name Benny Guzman	
Amount (\$) 700.00	Payee address; City; State; Zip Code 1159 N Madison Ave Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	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 Tejano Band Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 03/14/2019	Payee name USPS	
Amount (\$) 110.00	Payee address; City; State; Zip Code 400 N Ervay St Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps
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: 22 of 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 02/27/2019	5 Payee name Oak Cliff Chamber of Commerce	
6 Amount (\$) 350.00	7 Payee address; City; State; Zip Code 1001 N. Bishop Ave Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 03/07/2019	Payee name Dash 4 the Beads	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 700 W. Canty St Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gold Sponsorship - 2019 Dash
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 03/17/2019	Payee name Chad West, PLLC	
Amount (\$) 260.08	Payee address; City; State; Zip Code 3606 S Tyler St Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	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 block walkers meals
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: 23 of 29		2 FILER NAME Mr Chad A West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/15/2019		5 Payee name Amazon			
6 Amount (\$) 28.64		7 Payee address; City; State; Zip Code 1200 12th Ave South Suite 100 Seattle, WA 98144			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting 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	
				Ross Chapin / Pocket Neighborhoods	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 03/18/2019		Payee name Hunkys Hamburgers			
Amount (\$) 48.19		Payee address; City; State; Zip Code 321 N Bishop Ave Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
				Blockwalker meal	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 02/08/2019		Payee name Go Oak Cliff			
Amount (\$) 1000.00		Payee address; City; State; Zip Code 408 W. 8th St Suite 103 Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations		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 ONLY 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: 24 of 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 03/06/2019	5 Payee name Qualigraphics	
6 Amount (\$) 2150.71	7 Payee address; City; State; Zip Code 2909 Cole Ave Suite 300 Dallas, TX 75204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Printed Materials
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 03/06/2019	Payee name Qualigraphics	
Amount (\$) 1390.53	Payee address; City; State; Zip Code 2909 Cole Ave Suite 300 Dallas, TX 75204	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Tshirts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 03/20/2019	Payee name 7-Eleven	
Amount (\$) 5.07	Payee address; City; State; Zip Code 225 E. Colorado Dallas, TX 75203	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Snacks for Blockwalkers
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: 25 of 29		2 FILER NAME Mr Chad A West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/20/2019		5 Payee name Plat Parking Lot 154			
6 Amount (\$) 6.00		7 Payee address; City; State; Zip Code 917 San Jacinto St Dallas, TX 75202			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Parking	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held			
Date 03/20/2019		Payee name Big Frog Custom Tshirts			
Amount (\$) 69.89		Payee address; City; State; Zip Code 322 West Davis St Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Tshirts	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held			
Date 03/20/2019		Payee name Home Depot			
Amount (\$) 116.44		Payee address; City; State; Zip Code 2901 West Wheatland RdDallas, TX 75237			
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 Sign Materials	
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: 26 of 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 03/21/2019	5 Payee name Yolk	
6 Amount (\$) 19.78	7 Payee address; City; State; Zip Code 1722 Routh St Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 DMA Event on Urbanism
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/08/2019	Candidate / Officeholder name Bishop Dunne Catholic School	
Amount (\$) 250.00	Payee address; City; State; Zip Code 3900 Rugged Dr Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Literary Festival Friend Sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/24/2019	Candidate / Officeholder name Chad West, PLLC	
Amount (\$) 226.10	Payee address; City; State; Zip Code 3606 S Tyler St Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	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 Block Walker Meals
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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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: 27 of 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 03/24/2019	5 Payee name North Oak Cliff Beer and Wine	
6 Amount (\$) 60.88	7 Payee address; City; State; Zip Code 1301 West Davis St Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Supplies for Meet and Greet
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/19/2019	Candidate / Officeholder name Payee name Qualigraphics	
Amount (\$) 382.40	Payee address; City; State; Zip Code 2909 Cole Ave Suite 300 Dallas, TX 75204	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printed Materials
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/19/2019	Candidate / Officeholder name Payee name Qualigraphics	
Amount (\$) 192.19	Payee address; City; State; Zip Code 2909 Cole Ave Suite 300 Dallas, TX 75204	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printed Materials
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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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: 28 of 29		2 FILER NAME Mr Chad A West		3 Filer ID (Ethics Commission Filers)	
4 Date 03/21/2019		5 Payee name Susan Craig			
6 Amount (\$) 500.00		7 Payee address; City; State; Zip Code 2511 Wedglea Dr Suite 500 Dallas, TX 75211			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Blockwalkers	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/15/2019		Payee name Methodist Hospital of Dallas Guild			
Amount (\$) 250.00		Payee address; City; State; Zip Code 1441 N Beckley Ave Dallas, TX 75203			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/12/2019		Payee name The Well			
Amount (\$) 500.00		Payee address; City; State; Zip Code 125 Sunset Ave Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Friends of the Well Sponsorship	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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: 29 of 29	2 FILER NAME Mr Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 03/22/2019	5 Payee name Youth Football of Cedar Hill	
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 2798 Park Ridge Dr Cedar Hill, TX 75104	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship - Oak Cliff Cowboys
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought	
Office held	Office held	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <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		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought	
Office held	Office held	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <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		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought	
Office held	Office held	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <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		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		