

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed: 32		OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI			
	Cara L					
NICKNAME		LAST	SUFFIX			
		Mendelsohn				
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)			
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit				
	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)				
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report				
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year
	01	01	2021	THROUGH	03	22

6 EXPLANATION OF CORRECTION

Include campaign contribution made during the period.

7 AFFIDAVIT

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

Check ONLY if applicable:

☐ **Semiannual reports:** I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☒ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

*** Electronically Certified ***

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Cara L Mendelsohn, this the 7th day of April, 2021, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

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

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

32

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY		
	Cara		L			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	NICKNAME	LAST	SUFFIX	Date Received		
	Mendelsohn					
5 CANDIDATE/ OFFICEHOLDER PHONE	ADDRESS / PO BOX; APT / SUITE #;		CITY;	STATE;	ZIP CODE	
	7120 Van Hook Drive		Dallas TX 75248			
6 CAMPAIGN TREASURER NAME	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked		
	(469)	939 6123				
7 CAMPAIGN TREASURER ADDRESS	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$	
	Dinah			Date Processed		
8 CAMPAIGN TREASURER PHONE	NICKNAME	LAST	SUFFIX	Date Imaged		
	Miller					
9 REPORT TYPE	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE					
	15807 Nedra Way Dallas TX 75248					
10 PERIOD COVERED	(Residence or Business)					
11 ELECTION	AREA CODE	PHONE NUMBER	EXTENSION			
	(972)	980	4463			
12 OFFICE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)					
13 OFFICE SOUGHT (if known)	Month	Day	Year	Month	Day	Year
	01	01	2021	03	22	2021
14 OFFICE HELD (if any)	ELECTION DATE					ELECTION TYPE
	Month	Day	Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
05 / 01 / 2021						

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME

Cara L Mendelsohn

15 Filer ID (Ethics Commission Filers)

**16 NOTICE FROM
POLITICAL
COMMITTEE(S)**

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. *THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT.* CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

**17 CONTRIBUTION
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

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

\$ 18151.00

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,
UNLESS ITEMIZED

\$ 0.00

4. **TOTAL POLITICAL EXPENDITURES**

\$ 11029.72

**CONTRIBUTION
BALANCE**

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

\$ 24783.44

**OUTSTANDING
LOAN TOTALS**

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

\$ 21200.00

18 AFFIDAVIT

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

ELECTRONICALLY CERTIFIED

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Cara L Mendelsohn, this the 7th
day of April, 20 21, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME Cara L Mendelsohn	20 Filer ID (Ethics Commission Filers)
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21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 18,151.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 7,641.64
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 checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 1,791.24
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 1,596.84
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 20**2** FILER NAME

Cara L Mendelsohn

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

03/16/2021

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

Kimberly and Darwin Deason

7 Amount of contribution (\$)

2000.00

6 Contributor address;

City; State; Zip Code

3953 Maple Ave Suite 150

Dallas, TX 75219

8 Principal occupation / Job title (See Instructions)

Businessman

9 Employer (See Instructions)

Date

02/24/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Addy

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

3805 Normandy Ave

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Executive Chairman

Employer (See Instructions)

ISN Corporation

Date

02/24/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lydia Addy

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

3805 Normandy Ave

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Founder

Employer (See Instructions)

The Addy Foundation

Date

03/12/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jim Pitts Jim Pitts Consulting

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

5298 Jessica Ln

Frisco, TX 75034

Principal occupation / Job title (See Instructions)

Consultant

Employer (See Instructions)

Jim Pitts Consulting

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 20**2** FILER NAME

Cara L Mendelsohn

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

02/03/2021

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

Jack Bronstad

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

6223 Pineview Rd

Dallas, TX 75248

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

Date

01/04/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John and Helen Stettler

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

P.O. Box 697

Royse City, TX 75189

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/06/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bill and Margaret Hoyt

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

4404 Creekmeadow Dr

Dallas, TX 75287

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/08/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Richard and Christine Guldi

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

7228 La Sobrina Dr

Dallas, TX 75248

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 20**2** FILER NAME

Cara L Mendelsohn

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

01/09/2021

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

Robert and Mary Rycroft

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

4331 Creekmeadow Dr

Dallas, TX 75287

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

Date

01/06/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

J. McDonald and Ellen Carter Williams

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

8604 Greenville Ave Suite 200

Dallas, TX 75243

Principal occupation / Job title (See Instructions)
retired

Employer (See Instructions)

Date

01/04/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Beverly Strauss

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

7009 Spanky Branch Dr

Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/06/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robin Farkas

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

7150 Eudora Drive

Dallas, TX 75230

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 20

2 FILER NAME

Cara L Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 Date

01/06/2021

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

JR McCraw

6 Contributor address;

City; State; Zip Code

6431 Riverview Ln

Dallas, TX 75248

7 Amount of contribution (\$)

200.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

01/07/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dena Marra

Contributor address;

City; State; Zip Code

P.O. Box 1008

Colleyville, TX 76034

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/10/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Betty Oliver

Contributor address;

City; State; Zip Code

4230 Lawngate Dr

Dallas, TX 75287

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/12/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jinny Aguillard

Contributor address;

City; State; Zip Code

4316 Joshua Ln

Dallas, TX 75287

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Cara L Mendelsohn

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

01/13/2021

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

Shawn Southworth

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

5124 Bellerive Dr

Dallas, TX 75287

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

Date

01/14/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jolene Risch-Minsky

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

6011 Warm Mist Ln

Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/15/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tyler McKelvy

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

7127 Crooked Oak Dr

Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/15/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Susie Wolbe

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

5200 Keller Springs Rd Suite 1602 Dallas, TX 75248

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 20

2 FILER NAME

Cara L Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 Date

01/15/2021

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Esme Jacobson

6 Contributor address;

City; State; Zip Code

6292 Willowgate

Dallas, TX 75230

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

01/15/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Linda Behr

Contributor address;

City; State; Zip Code

5115 Quail Lake

Dallas, TX 75287

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/15/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Eric Goldberg

Contributor address;

City; State; Zip Code

16810 Bradgate Ct

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/16/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Leslie Smith

Contributor address;

City; State; Zip Code

6965 Aspen Creek Lane

Dallas, TX 75252

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Cara L Mendelsohn

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

01/16/2021

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

Robert Culak

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

1223 Kings Hwy

Dallas, TX 75208

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

Date

01/17/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Elizabeth Richardson

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

12134 Elysian Ct

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/18/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Malcom Coney

Amount of contribution (\$)

20.00

Contributor address;

City; State; Zip Code

4244 Peppermill Lane

Dallas, TX 75287

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/18/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Leon Jacobson

Amount of contribution (\$)

75.00

Contributor address;

City; State; Zip Code

5818 Buffridge Trail

Dallas, TX 75252

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 20

2 FILER NAME

Cara L Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 Date

01/18/2021

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Nicole Wolack

6 Contributor address;

City; State; Zip Code

6319 Brook Lake Dr

Dallas, TX 75248

7 Amount of contribution (\$)

25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

01/18/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Aleksandra Rosen

Contributor address;

City; State; Zip Code

6924 Brentfield Dr

Dallas, TX 75248

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/19/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris Smith

Contributor address;

City; State; Zip Code

7205 Blythdale Dr

Dallas, TX 75248

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/19/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Susan Shores

Contributor address;

City; State; Zip Code

7415 Authon Dr

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
9 of 20

2 FILER NAME

Cara L Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 Date

01/19/2021

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Clifford Brott

6 Contributor address;

City; State; Zip Code

7127 Van Hook Drive

Dallas, TX 75248

7 Amount of contribution (\$)

200.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

01/19/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jonathan Itzhakov

Contributor address;

City; State; Zip Code

5931 Buffridge Trail

Dallas, TX 75252

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/22/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ken Kubiak

Contributor address;

City; State; Zip Code

16819 Colegrove

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/22/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Olga O'Reilly

Contributor address;

City; State; Zip Code

6710 Charlmont Cir

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
10 of 20

2 FILER NAME

Cara L Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 Date

01/23/2021

5 Full name of contributor

☐ out-of-state PAC (ID#: IL)

Aleksandra Rosen

6 Contributor address;

City; State; Zip Code

6924 Brentfield Dr

Dallas, TX 75248

7 Amount of contribution (\$)

200.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

01/23/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Todd and Steffani Bailin

Contributor address;

City; State; Zip Code

7112 Judi Ct

Dallas, TX 75252

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/24/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Shirley Hughes

Contributor address;

City; State; Zip Code

7665 Querida Ln

Dallas, TX 75248

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/24/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Hedley Rakusin

Contributor address;

City; State; Zip Code

4923 Stony Ford Drive

Dallas, TX 75287

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:
11 of 20**2** FILER NAME

Cara L Mendelsohn

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

01/25/2021

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

Anne Binns

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

4244 Briarbend Rd

Dallas, TX 75287

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

Date

01/26/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Zelene Lovitt

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

7856 La Cabeza

Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/27/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Janine Pulman

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

17215 Graystone Dr

Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/27/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Larry Krasner

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

6723 Duffield Dr

Dallas, TX 75248

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 20**2** FILER NAME

Cara L Mendelsohn

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

01/27/2021

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

Rena and Bud Silverberg

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

4808 San Gabriel

Dallas, TX 75229

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

Date

01/29/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Terry Kopel

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

7602 Kilmichael

Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/30/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Howard Hacker

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

6020 Oakcrest Rd

Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/30/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William K Arenson

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

18928 Voss Rd

Dallas, TX 75287

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 20

2 FILER NAME

Cara L Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 Date

01/31/2021

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Steven Reiman

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

4728 Stonehollow Way

Dallas, TX 75287

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/03/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jaynie Schultz

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

11222 Saint Michaels Drive

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/03/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dana Yarborough

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

4607 Bretton Bay Lane

Dallas, TX 75287

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/03/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Daniel Levitt

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

6039 Velasco 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:
14 of 20

2 FILER NAME

Cara L Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 Date

02/04/2021

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Basil Cohen

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

5822 Portsmouth Ln

Dallas, TX 75252

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/06/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Wayne LeBlanc

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

3827 Walden Way

Dallas, TX 75287

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/09/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brian Finkelstein

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

7118 Wester Way

Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/10/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gayle Kirsch

Amount of contribution (\$)

10.00

Contributor address;

City; State; Zip Code

17860 Windflower Way

Dallas, TX 75252

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 20

2 FILER NAME

Cara L Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 Date

02/13/2021

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Larry Offutt

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

6038 Bryan Pkwy

Dallas, TX 75206

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/15/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Black

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

2404 Seedling Ln

Dallas, TX 75287

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/24/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ken Carroll

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

7716 Lairds Lane

Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/25/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Reagan Rothenberger

Amount of contribution (\$)

35.00

Contributor address;

City; State; Zip Code

4315 Brooktree Lane

Dallas, TX 75287

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 20**2** FILER NAME

Cara L Mendelsohn

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

02/27/2021

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

Randall Dillman

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

5315 Harbor Town Drive

Dallas, TX 75287

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

Date

02/27/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jean G Lemons

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

5116 Sea Pines Drive

Dallas, TX 75287

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

DAVE NEUMANN

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

6318 TURNER WAY

DALLAS, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lane Connor

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

4316 Brooktree Lane

Dallas, TX 75287

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 20**2** FILER NAME

Cara L Mendelsohn

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

03/13/2021

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

Kelli Love

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

6522 Redpine Rd

Dallas, TX 75248

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

Date

03/15/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Douglas Deason

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

10134 Waller Drive

Dallas, TX 75229

Principal occupation / Job title (See Instructions)
PresidentEmployer (See Instructions)
Deason Capital Services, LLC

Date

03/15/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jacki Deason

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

10134 Waller Drive

Dallas, TX 75229

Principal occupation / Job title (See Instructions)
Senior FellowEmployer (See Instructions)
Texas Public Policy Foundation

Date

03/16/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Boris Olshansky

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

6814 Windrock

Dallas, TX 75252

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 20**2** FILER NAME

Cara L Mendelsohn

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

03/19/2021

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

Hollye Ferreira

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

6919 Spanky Branch Ct

Dallas, TX 75248

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

Date

03/21/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Cindy Moskowitz

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

5915 Warm Mist Ln

Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/11/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Arlin and Tobe Goldberg

Amount of contribution (\$)

36.00

Contributor address;

City; State; Zip Code

7423 Whispering Pines

Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/21/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Adam and Margot Carter

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

3913 Amherst Ave

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
19 of 20

2 FILER NAME

Cara L Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 Date

01/21/2021

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Courtney Rai

6 Contributor address;

City; State; Zip Code

4107 Cobblers Ln

Dallas, TX 75287

7 Amount of contribution (\$)

50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/13/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ann Irvin

Contributor address;

City; State; Zip Code

5934 Warm Mist Ln

Dallas, TX 75248

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/18/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joanna St. Angelo

Contributor address;

City; State; Zip Code

3221 Red Bird Ln

Grapevine, TX 76051

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/01/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dane Cofer

Contributor address;

City; State; Zip Code

17103 Davenport Rd

Dallas, TX 75248

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:
20 of 20

2 FILER NAME

Cara L Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 Date

03/01/2021

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Apartment Association of Greater Dallas-PAC

6 Contributor address;

City; State; Zip Code

5728 LBJ Frwy Suite 100

Dallas, TX 75240

7 Amount of contribution (\$)

2500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 2		2 FILER NAME Cara L Mendelsohn		3 Filer ID (Ethics Commission Filers)	
4 Date 03/18/2021		5 Payee name MNA			
6 Amount (\$) 5317.07		7 Payee address; City; State; Zip Code 815 Brazos St Suite 304 Austin, CA 78701			
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 mailer	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/04/2021		Payee name MNA			
Amount (\$) 648.20		Payee address; City; State; Zip Code 815 Brazos St Suite 304 Austin, CA 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense door hangers	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/11/2021		Payee name MNA			
Amount (\$) 550.00		Payee address; City; State; Zip Code 815 Brazos St Suite 304 Austin, CA 78701			
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	

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 2	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)
4 Date 03/18/2021	5 Payee name MNA	
6 Amount (\$) 992.57	7 Payee address; City; State; Zip Code 815 Brazos St Suite 304 Austin, CA 78701	
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 door hangers
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 03/22/2021	Payee name DOJ Life.com	
Amount (\$) 133.80	Payee address; City; State; Zip Code 7103 Mumford Ct Dallas, TX 75252	
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 Ad buy
	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	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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 1 of 4	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date 01/23/2021	6 Payee name The Home Depot	
7 Amount (\$) 39.76	8 Payee address; City; State; Zip Code 2220 N Coit Rd Richardson, TX 75080	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 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 fence post driver
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 01/18/2021	Payee name The Home Depot	
Amount (\$) 84.54	Payee address; City; State; Zip Code 2220 N Coit Rd Richardson, TX 75080	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
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 ties
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		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:
2 of 4

2 FILER NAME
Cara L Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD

\$

5 Date
01/23/2021

6 Payee name
The Home Depot

7 Amount (\$)
76.85

8 Payee address; City; State; Zip Code
2220 N Coit Rd Richardson, TX 75080

9 TYPE OF
EXPENDITURE

☒

Political

☐

Non-Political

10 PURPOSE
OF
EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)

Advertising Expense

(b) Description

☐

Check if travel outside of Texas. Complete Schedule T.

☐

Check if Austin, TX, officeholder living expense
sign ties and pliers

11 Complete ONLY if direct
expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

Date
03/21/2021

Payee name
The Home Depot

Amount (\$)
37.69

Payee address; City; State; Zip Code
2220 N Coit Rd Richardson, TX 75080

TYPE OF
EXPENDITURE

☒

Political

☐

Non-Political

PURPOSE
OF
EXPENDITURE

Category (See Categories listed at the top of this schedule)

Advertising Expense

Description

☐

Check if travel outside of Texas. Complete Schedule T.

☐

Check if Austin, TX, officeholder living expense
sign ties

Complete ONLY if direct
expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 3 of 4	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)			
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$			
5 Date 03/12/2021	6 Payee name Amazon				
7 Amount (\$) 168.88	8 Payee address; City; State; Zip Code 410 Terry Ave Seattle, WA 98109				
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political				
10 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 stakes			
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; text-align: center;">Candidate / Officeholder name</td> <td style="width: 33%; text-align: center;">Office sought</td> <td style="width: 33%; text-align: center;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date 01/25/2021	Payee name comfortcolors.com				
Amount (\$) 512.35	Payee address; City; State; Zip Code 1980 Clements Ferry Rd Charleston, SC 29492				
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political				
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 t-shirts			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; text-align: center;">Candidate / Officeholder name</td> <td style="width: 33%; text-align: center;">Office sought</td> <td style="width: 33%; text-align: center;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 4 of 4	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date 01/19/2021	6 Payee name Discountmugs.com	
7 Amount (\$) 529.34	8 Payee address; City; State; Zip Code 12610 NW 115th Ave Miami, FL 33178	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 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 masks
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 01/25/2021	Payee name CustomInk.com	
Amount (\$) 341.83	Payee address; City; State; Zip Code 5959 Royal Lane Suite 633 Dallas, TX 75230	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
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 t-shirts
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 PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1 of 3	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)
4 Date 02/11/2021	5 Payee name Master Card - Citi	
6 Amount (\$) 341.83 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 78045 Phoenix, AZ 85062	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense t-shirts
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 02/11/2021	Payee name Master Card - Citi	
Amount (\$) 529.34 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 78045 Phoenix, AZ 85062	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense masks
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 02/11/2021	Payee name Master Card - Citi	
Amount (\$) 512.35 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 78045 Phoenix, AZ 85062	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense t-shirts
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 PERSONAL FUNDS

SCHEDULE G

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 G: 2 of 3	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)
4 Date 02/11/2021	5 Payee name Master Card - Citi	
6 Amount (\$) 76.85 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 78045 Phoenix, AZ 85062	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(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 ties and pliers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/11/2021	Payee name Master Card - Citi	
Amount (\$) 84.54 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 78045 Phoenix, AZ 85062	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	(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 ties
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/11/2021	Payee name Master Card - Citi	
Amount (\$) 39.76 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 78045 Phoenix, AZ 85062	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fence post driver
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 3 of 3	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)
4 Date 01/11/2021	5 Payee name Master Card - Citi	
6 Amount (\$) 12.17 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 78045 Phoenix, AZ 85062	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain name
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought	
<input type="checkbox"/> Reimbursement from political contributions intended	Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) 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	
<input type="checkbox"/> Reimbursement from political contributions intended	Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) 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	
<input type="checkbox"/> Reimbursement from political contributions intended	Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) 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

FORM SR

Cover Sheet

Created Date March 15, 2015

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Cara L Mendelsohn

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

03/16/2021

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

Kimberly and Darwin Deason

6 Contributor address;

City; State; Zip Code

3953 Maple Ave Suite 150

Dallas, TX 75219

7 Amount of contribution (\$)

2000.00

8 Principal occupation / Job title (See Instructions)

Businessman

9 Employer (See Instructions)

Date

02/24/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Addy

Contributor address;

City; State; Zip Code

3805 Normandy Ave

Dallas, TX 75205

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Executive Chairman

Employer (See Instructions)

ISN Corporation

Date

02/24/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lydia Addy

Contributor address;

City; State; Zip Code

3805 Normandy Ave

Dallas, TX 75205

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Founder

Employer (See Instructions)

The Addy Foundation

Date

03/12/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jim Pitts Jim Pitts Consulting

Contributor address;

City; State; Zip Code

5298 Jessica Ln

Frisco, TX 75034

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Consultant

Employer (See Instructions)

Jim Pitts Consulting

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 20**2** FILER NAME

Cara L Mendelsohn

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

02/03/2021

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

Jack Bronstad

6 Contributor address;

City; State; Zip Code

6223 Pineview Rd

Dallas, TX 75248

7 Amount of contribution (\$)

100.00

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

Date

01/04/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John and Helen Stettler

Contributor address;

City; State; Zip Code

P.O. Box 697

Royse City, TX 75189

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/06/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bill and Margaret Hoyt

Contributor address;

City; State; Zip Code

4404 Creekmeadow Dr

Dallas, TX 75287

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/08/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Richard and Christine Guldi

Contributor address;

City; State; Zip Code

7228 La Sobrina Dr

Dallas, TX 75248

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:
3 of 20**2** FILER NAME

Cara L Mendelsohn

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

01/09/2021

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

Robert and Mary Rycroft

6 Contributor address;

City; State; Zip Code

4331 Creekmeadow Dr

Dallas, TX 75287

7 Amount of contribution (\$)

250.00

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

Date

01/06/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

J. McDonald and Ellen Carter Williams

Contributor address;

City; State; Zip Code

8604 Greenville Ave Suite 200

Dallas, TX 75243

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)
retired

Employer (See Instructions)

Date

01/04/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Beverly Strauss

Contributor address;

City; State; Zip Code

7009 Spanky Branch Dr

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/06/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robin Farkas

Contributor address;

City; State; Zip Code

7150 Eudora Drive

Dallas, TX 75230

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:
4 of 20**2** FILER NAME

Cara L Mendelsohn

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

01/06/2021

Campaign
Contribution**5** Full name of contributor

JR McCraw

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

6431 Riverview Ln

City; State; Zip Code

Dallas, TX 75248

7 Amount of contribution (\$)

200.00

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

Date

01/07/2021

Campaign
Contribution

Full name of contributor

Dena Marra

☐ out-of-state PAC (ID#: _____)

Contributor address;

P.O. Box 1008

City; State; Zip Code

Colleyville, TX 76034

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/10/2021

Campaign
Contribution

Full name of contributor

Betty Oliver

☐ out-of-state PAC (ID#: _____)

Contributor address;

4230 Lawngate Dr

City; State; Zip Code

Dallas, TX 75287

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/12/2021

Campaign
Contribution

Full name of contributor

Jinny Aguillard

☐ out-of-state PAC (ID#: _____)

Contributor address;

4316 Joshua Ln

City; State; Zip Code

Dallas, TX 75287

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Cara L Mendelsohn

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

01/13/2021

Campaign
Contribution**5** Full name of contributor

Shawn Southworth

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

5124 Bellerive Dr

City; State; Zip Code

Dallas, TX 75287

7 Amount of contribution (\$)

100.00

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

Date

01/14/2021

Campaign
Contribution

Full name of contributor

Jolene Risch-Minsky

☐ out-of-state PAC (ID#: _____)

Contributor address;

6011 Warm Mist Ln

City; State; Zip Code

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/15/2021

Campaign
Contribution

Full name of contributor

Tyler McKelvy

☐ out-of-state PAC (ID#: _____)

Contributor address;

7127 Crooked Oak Dr

City; State; Zip Code

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/15/2021

Campaign
Contribution

Full name of contributor

Susie Wolbe

☐ out-of-state PAC (ID#: _____)

Contributor address;

5200 Keller Springs Rd Suite 1602

City; State; Zip Code

Dallas, TX 75248

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:
6 of 20**2** FILER NAME

Cara L Mendelsohn

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

01/15/2021

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

Esme Jacobson

6 Contributor address;

City; State; Zip Code

6292 Willowgate

Dallas, TX 75230

7 Amount of contribution (\$)

100.00

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

Date

01/15/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Linda Behr

Contributor address;

City; State; Zip Code

5115 Quail Lake

Dallas, TX 75287

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/15/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Eric Goldberg

Contributor address;

City; State; Zip Code

16810 Bradgate Ct

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/16/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Leslie Smith

Contributor address;

City; State; Zip Code

6965 Aspen Creek Lane

Dallas, TX 75252

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Cara L Mendelsohn

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

01/16/2021

Campaign
Contribution**5** Full name of contributor

Robert Culak

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

1223 Kings Hwy

City; State; Zip Code

Dallas, TX 75208

7 Amount of contribution (\$)

50.00

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

Date

01/17/2021

Campaign
Contribution

Full name of contributor

Elizabeth Richardson

☐ out-of-state PAC (ID#: _____)

Contributor address;

12134 Elysian Ct

City; State; Zip Code

Dallas, TX 75230

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/18/2021

Campaign
Contribution

Full name of contributor

Malcom Coney

☐ out-of-state PAC (ID#: _____)

Contributor address;

4244 Peppermill Lane

City; State; Zip Code

Dallas, TX 75287

Amount of contribution (\$)

20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/18/2021

Campaign
Contribution

Full name of contributor

Leon Jacobson

☐ out-of-state PAC (ID#: _____)

Contributor address;

5818 Buffridge Trail

City; State; Zip Code

Dallas, TX 75252

Amount of contribution (\$)

75.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Cara L Mendelsohn

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

01/18/2021

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

Nicole Wolack

6 Contributor address;

City; State; Zip Code

6319 Brook Lake Dr

Dallas, TX 75248

7 Amount of contribution (\$)

25.00

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

Date

01/18/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Aleksandra Rosen

Contributor address;

City; State; Zip Code

6924 Brentfield Dr

Dallas, TX 75248

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/19/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris Smith

Contributor address;

City; State; Zip Code

7205 Blythdale Dr

Dallas, TX 75248

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/19/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Susan Shores

Contributor address;

City; State; Zip Code

7415 Authon Dr

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Cara L Mendelsohn

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

01/19/2021

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

Clifford Brott

6 Contributor address;

City; State; Zip Code

7127 Van Hook Drive

Dallas, TX 75248

7 Amount of contribution (\$)

200.00

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

Date

01/19/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jonathan Itzhakov

Contributor address;

City; State; Zip Code

5931 Buffridge Trail

Dallas, TX 75252

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/22/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ken Kubiak

Contributor address;

City; State; Zip Code

16819 Colegrove

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/22/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Olga O'Reilly

Contributor address;

City; State; Zip Code

6710 Charlmont Cir

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Cara L Mendelsohn

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

01/23/2021

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

Aleksandra Rosen

6 Contributor address;

City; State; Zip Code

6924 Brentfield Dr

Dallas, TX 75248

7 Amount of contribution (\$)

200.00

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

Date

01/23/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Todd and Steffani Bailin

Contributor address;

City; State; Zip Code

7112 Judi Ct

Dallas, TX 75252

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/24/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Shirley Hughes

Contributor address;

City; State; Zip Code

7665 Querida Ln

Dallas, TX 75248

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/24/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Hedley Rakusin

Contributor address;

City; State; Zip Code

4923 Stony Ford Drive

Dallas, TX 75287

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:
11 of 20**2** FILER NAME

Cara L Mendelsohn

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

01/25/2021

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

Anne Binns

6 Contributor address;

City; State; Zip Code

4244 Briarbend Rd

Dallas, TX 75287

7 Amount of contribution (\$)

100.00

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

Date

01/26/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Zelene Lovitt

Contributor address;

City; State; Zip Code

7856 La Cabeza

Dallas, TX 75248

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/27/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Janine Pulman

Contributor address;

City; State; Zip Code

17215 Graystone Dr

Dallas, TX 75248

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/27/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Larry Krasner

Contributor address;

City; State; Zip Code

6723 Duffield Dr

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Cara L Mendelsohn

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

01/27/2021

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

Rena and Bud Silverberg

6 Contributor address;

City; State; Zip Code

4808 San Gabriel

Dallas, TX 75229

7 Amount of contribution (\$)

100.00

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

Date

01/29/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Terry Kopel

Contributor address;

City; State; Zip Code

7602 Kilmichael

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/30/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Howard Hacker

Contributor address;

City; State; Zip Code

6020 Oakcrest Rd

Dallas, TX 75248

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/30/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William K Arenson

Contributor address;

City; State; Zip Code

18928 Voss Rd

Dallas, TX 75287

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Cara L Mendelsohn

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

01/31/2021

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

Steven Reiman

6 Contributor address;

City; State; Zip Code

4728 Stonehollow Way

Dallas, TX 75287

7 Amount of contribution (\$)

50.00

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

Date

02/03/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jaynie Schultz

Contributor address;

City; State; Zip Code

11222 Saint Michaels Drive

Dallas, TX 75230

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/03/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dana Yarborough

Contributor address;

City; State; Zip Code

4607 Bretton Bay Lane

Dallas, TX 75287

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/03/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Daniel Levitt

Contributor address;

City; State; Zip Code

6039 Velasco Ave

Dallas, TX 75206

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Cara L Mendelsohn

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

02/04/2021

Campaign
Contribution**5** Full name of contributor

Basil Cohen

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

5822 Portsmouth Ln

City; State; Zip Code

Dallas, TX 75252

7 Amount of contribution (\$)

50.00

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

Date

02/06/2021

Campaign
Contribution

Full name of contributor

Wayne LeBlanc

☐ out-of-state PAC (ID#: _____)

Contributor address;

3827 Walden Way

City; State; Zip Code

Dallas, TX 75287

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/09/2021

Campaign
Contribution

Full name of contributor

Brian Finkelstein

☐ out-of-state PAC (ID#: _____)

Contributor address;

7118 Wester Way

City; State; Zip Code

Dallas, TX 75248

Amount of contribution (\$)

150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/10/2021

Campaign
Contribution

Full name of contributor

Gayle Kirsch

☐ out-of-state PAC (ID#: _____)

Contributor address;

17860 Windflower Way

City; State; Zip Code

Dallas, TX 75252

Amount of contribution (\$)

10.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
15 of 20

2 FILER NAME

Cara L Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 Date

02/13/2021

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Larry Offutt

6 Contributor address;

City; State; Zip Code

6038 Bryan Pkwy

Dallas, TX 75206

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/15/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Black

Contributor address;

City; State; Zip Code

2404 Seedling Ln

Dallas, TX 75287

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/24/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ken Carroll

Contributor address;

City; State; Zip Code

7716 Lairds Lane

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/25/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Reagan Rothenberger

Contributor address;

City; State; Zip Code

4315 Brooktree Lane

Dallas, TX 75287

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:
16 of 20**2** FILER NAME

Cara L Mendelsohn

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

02/27/2021

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

Randall Dillman

6 Contributor address;

City; State; Zip Code

5315 Harbor Town Drive

Dallas, TX 75287

7 Amount of contribution (\$)

100.00

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

Date

02/27/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jean G Lemons

Contributor address;

City; State; Zip Code

5116 Sea Pines Drive

Dallas, TX 75287

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

DAVE NEUMANN

Contributor address;

City; State; Zip Code

6318 TURNER WAY

DALLAS, TX 75230

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lane Connor

Contributor address;

City; State; Zip Code

4316 Brooktree Lane

Dallas, TX 75287

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Cara L Mendelsohn

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

03/13/2021

Campaign
Contribution**5** Full name of contributor

Kelli Love

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

6522 Redpine Rd

City; State; Zip Code

Dallas, TX 75248

7 Amount of contribution (\$)

50.00

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

Date

03/15/2021

Campaign
Contribution

Full name of contributor

Douglas Deason

☐ out-of-state PAC (ID#: _____)

Contributor address;

10134 Waller Drive

City; State; Zip Code

Dallas, TX 75229

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

President

Employer (See Instructions)

Deason Capital Services, LLC

Date

03/15/2021

Campaign
Contribution

Full name of contributor

Jacki Deason

☐ out-of-state PAC (ID#: _____)

Contributor address;

10134 Waller Drive

City; State; Zip Code

Dallas, TX 75229

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Senior Fellow

Employer (See Instructions)

Texas Public Policy Foundation

Date

03/16/2021

Campaign
Contribution

Full name of contributor

Boris Olshansky

☐ out-of-state PAC (ID#: _____)

Contributor address;

6814 Windrock

City; State; Zip Code

Dallas, TX 75252

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Cara L Mendelsohn

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

03/19/2021

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

Hollye Ferreira

6 Contributor address;

City; State; Zip Code

6919 Spanky Branch Ct

Dallas, TX 75248

7 Amount of contribution (\$)

100.00

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

Date

03/21/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Cindy Moskowitz

Contributor address;

City; State; Zip Code

5915 Warm Mist Ln

Dallas, TX 75248

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/11/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Arlin and Tobe Goldberg

Contributor address;

City; State; Zip Code

7423 Whispering Pines

Dallas, TX 75248

Amount of contribution (\$)

36.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/21/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Adam and Margot Carter

Contributor address;

City; State; Zip Code

3913 Amherst Ave

Dallas, TX 75225

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Cara L Mendelsohn

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

01/21/2021

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

Courtney Rai

6 Contributor address;

City; State; Zip Code

4107 Cobblers Ln

Dallas, TX 75287

7 Amount of contribution (\$)

50.00

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

Date

02/13/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ann Irvin

Contributor address;

City; State; Zip Code

5934 Warm Mist Ln

Dallas, TX 75248

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/18/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joanna St. Angelo

Contributor address;

City; State; Zip Code

3221 Red Bird Ln

Grapevine, TX 76051

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/01/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dane Cofer

Contributor address;

City; State; Zip Code

17103 Davenport Rd

Dallas, TX 75248

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:
20 of 20

2 FILER NAME

Cara L Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 Date

03/01/2021

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Apartment Association of Greater Dallas-PAC

6 Contributor address;

City; State; Zip Code

5728 LBJ Frwy Suite 100

Dallas, TX 75240

7 Amount of contribution (\$)

2500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 2	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)
4 Date 03/18/2021	5 Payee name MNA	
6 Amount (\$) 5317.07 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 815 Brazos St Suite 304 Austin, CA 78701	
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 mailer
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 03/04/2021	Payee name MNA	
Amount (\$) 648.20 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 815 Brazos St Suite 304 Austin, CA 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense door hangers
	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 01/11/2021	Payee name MNA	
Amount (\$) 550.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 815 Brazos St Suite 304 Austin, CA 78701	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 2	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)
4 Date 03/18/2021	5 Payee name MNA	
6 Amount (\$) 992.57 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 815 Brazos St Suite 304 Austin, CA 78701	
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 door hangers
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 03/22/2021	Payee name DOJ Life.com	
Amount (\$) 133.80 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 7103 Mumford Ct Dallas, TX 75252	
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 Ad buy
	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	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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 1 of 4	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date 01/23/2021	6 Payee name The Home Depot	
7 Amount (\$) 39.76 Campaign Funds for Campaign Expenditures	8 Payee address; City; State; Zip Code 2220 N Coit Rd Richardson, TX 75080	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 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 fence post driver
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 01/18/2021	Payee name The Home Depot	
Amount (\$) 84.54 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 2220 N Coit Rd Richardson, TX 75080	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
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 ties
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		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 2 of 4	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)			
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$			
5 Date 01/23/2021	6 Payee name The Home Depot				
7 Amount (\$) 76.85 Campaign Funds for Campaign Expenditures	8 Payee address; City; State; Zip Code 2220 N Coit Rd Richardson, TX 75080				
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political				
10 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 ties and pliers			
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; text-align: center;">Candidate / Officeholder name</td> <td style="width: 33%; text-align: center;">Office sought</td> <td style="width: 33%; text-align: center;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			

Date 03/21/2021	Payee name The Home Depot				
Amount (\$) 37.69 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 2220 N Coit Rd Richardson, TX 75080				
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political				
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 ties			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; text-align: center;">Candidate / Officeholder name</td> <td style="width: 33%; text-align: center;">Office sought</td> <td style="width: 33%; text-align: center;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 3 of 4	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)			
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$			
5 Date 03/12/2021	6 Payee name Amazon				
7 Amount (\$) 168.88 Campaign Funds for Campaign Expenditures	8 Payee address; City; State; Zip Code 410 Terry Ave Seattle, WA 98109				
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political				
10 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 stakes			
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; text-align: center;">Candidate / Officeholder name</td> <td style="width: 33%; text-align: center;">Office sought</td> <td style="width: 33%; text-align: center;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date 01/25/2021	Payee name comfortcolors.com				
Amount (\$) 512.35 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 1980 Clements Ferry Rd Charleston, SC 29492				
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political				
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 t-shirts			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; text-align: center;">Candidate / Officeholder name</td> <td style="width: 33%; text-align: center;">Office sought</td> <td style="width: 33%; text-align: center;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 4 of 4	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date 01/19/2021	6 Payee name Discountmugs.com	
7 Amount (\$) 529.34 Campaign Funds for Campaign Expenditures	8 Payee address; City; State; Zip Code 12610 NW 115th Ave Miami, FL 33178	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 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 masks
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 01/25/2021	Payee name CustomInk.com	
Amount (\$) 341.83 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 5959 Royal Lane Suite 633 Dallas, TX 75230	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
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 t-shirts
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 PERSONAL FUNDS

SCHEDULE G

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 G: 1 of 3	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)
4 Date 02/11/2021	5 Payee name Master Card - Citi	
6 Amount (\$) 341.83 Campaign Funds for Campaign Expenditures <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 78045 Phoenix, AZ 85062	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense t-shirts
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/11/2021	Payee name Master Card - Citi	
Amount (\$) 529.34 Campaign Funds for Campaign Expenditures <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 78045 Phoenix, AZ 85062	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense masks
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/11/2021	Payee name Master Card - Citi	
Amount (\$) 512.35 Campaign Funds for Campaign Expenditures <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 78045 Phoenix, AZ 85062	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense t-shirts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G: 2 of 3	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)
4 Date 02/11/2021	5 Payee name Master Card - Citi	
6 Amount (\$) 76.85 Campaign Funds for Campaign Expenditures <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 78045 Phoenix, AZ 85062	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(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 ties and pliers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 02/11/2021	Payee name Master Card - Citi	
Amount (\$) 84.54 Campaign Funds for Campaign Expenditures <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 78045 Phoenix, AZ 85062	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	(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 ties
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 02/11/2021	Payee name Master Card - Citi	
Amount (\$) 39.76 Campaign Funds for Campaign Expenditures <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 78045 Phoenix, AZ 85062	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fence post driver
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 PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 3 of 3	2 FILER NAME Cara L Mendelsohn	3 Filer ID (Ethics Commission Filers)
4 Date 01/11/2021	5 Payee name Master Card - Citi	
6 Amount (\$) 12.17 Campaign Funds for Campaign Expenditures <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 78045 Phoenix, AZ 85062	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain name
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) 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	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) 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	Office sought Office held

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