

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed: 20		OFFICE USE ONLY		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI		Date Received			
	carolyn k					
	NICKNAME LAST SUFFIX					
	arnold					
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 type="checkbox"/> 30th day before election		<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)			
	<input checked="" type="checkbox"/> 8th day before election		<input type="checkbox"/> Final report			
	Date Hand-delivered or Date Postmarked					
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year
	04	22	2021	THROUGH	05	26
Date Processed						
Date Imaged						

6 EXPLANATION OF CORRECTION

additionalupdate needed

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 carolyn k arnold, this the 28th day of May, 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:

20

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY		
	carolyn		k			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	NICKNAME	LAST	SUFFIX	Date Received		
	arnold					
5 CANDIDATE/ OFFICEHOLDER PHONE	ADDRESS / PO BOX; APT / SUITE #;		CITY;	STATE;	ZIP CODE	
	835 Timber Dell		Dallas TX 75232			
6 CAMPAIGN TREASURER NAME	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked		
	(214)	-37 2194				
7 CAMPAIGN TREASURER ADDRESS	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$	
	Barbara			Date Processed		
8 CAMPAIGN TREASURER PHONE	NICKNAME	LAST	SUFFIX	Date Imaged		
	Record					
9 REPORT TYPE	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE					
	910 Stillmeadow Dallas TX 75232					
10 PERIOD COVERED	(Residence or Business)					
11 ELECTION	AREA CODE	PHONE NUMBER	EXTENSION			
	(214)	478 2160				
12 OFFICE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input checked="" 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
	04	22	2021	05	26	2021
14 OFFICE HELD (if any)	ELECTION DATE					
	Month	Day	Year	ELECTION TYPE		
15 OFFICE HELD (if any)	06	05	2021	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special		

GO TO PAGE 2

FORM C/OH
COVER SHEET PG 2

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

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME
carolyn k arnold

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 40,796.00
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	\$ 14,610.54
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

carolyn k arnold

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

05/10/2021

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

Harlon Crow Self

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

3819 Maple

Dallas, TX 75219

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

Date

05/19/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Apartment Assoc Apartment Assoc Apartment Assoc

Amount of contribution (\$)

1500.00

Contributor address;

City; State; Zip Code

5729 LBJ Freeway

Dallas, TX 75240

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/14/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ron Bivins self

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

111 Hampton

Dallas, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/15/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Price self

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

P.O. Box 224725

Dallas, TX 75222

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

carolyn k arnold

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

05/12/2021

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

Pamela Gates self

7 Amount of contribution (\$)

200.00

6 Contributor address;

City; State; Zip Code

1357 Bar Harbor

Dallas, TX 75232

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

Date

05/04/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

MetroTex MetroTex Metro-Texas

Amount of contribution (\$)

2500.00

Contributor address;

City; State; Zip Code

8201 N. Stemmons

Dallas, TX 75247

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/11/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Richard LeBlanc LeBlanc

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

3001 Knox Suite 405

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/23/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Beuck self

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

3663 Asbury

Dallas, TX 76206

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 13

2 FILER NAME

carolyn k arnold

3 Filer ID (Ethics Commission Filers)

4 Date

05/25/2021

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Beuck II self

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

1514 Sunset Terr

Ft Worth, TX 76102

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/26/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Martha Baker self

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

180 Gail

Weatherford, TX 76085

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/25/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jennifer Gates self

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

4914 Keyhole

Dallas, TX 75229

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/24/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Dean self

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

P.O. Box 140039

Dallas, TX 75214

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 13**2** FILER NAME

carolyn k arnold

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

05/13/2021

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

Michael Rawlings self

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

3879 Maple Ave

Dallas, TX 75219

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

Date

05/26/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robert Pitre self

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

2642 Harwood

Dallas, TX 75215

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/21/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Helen Giddings

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

400 zang

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/21/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Richard Knight self

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

6108 Redbird

Dallas, TX 75232

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 13

2 FILER NAME

carolyn k arnold

3 Filer ID (Ethics Commission Filers)

4 Date

05/24/2021

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bridget Lopez self

6 Contributor address;

City; State; Zip Code

4326 Meadow Lark

Dallas, TX 75229

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/25/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Billy Allen self

Contributor address;

City; State; Zip Code

830 Misty Glen

Dallas, TX 75232

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/25/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mae Beck self

Contributor address;

City; State; Zip Code

611 Brook Valley

Dallas, TX 75232

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/06/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

TREC TREC Real Estate

Contributor address;

City; State; Zip Code

3100 McKinnon

Dallas, TX 75201

Amount of contribution (\$)

2500.00

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 13**2** FILER NAME

carolyn k arnold

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

05/26/2021

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

Hector Gonzalez Sierra Political Committee

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

615 Willow

Dallas, TX 78202

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

Date

05/17/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Johnnie King self

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1243 Pleasant

Dallas, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/15/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dennis Gillespie

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

910 Green Castle

Dallas, TX 75232

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/27/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Virginia Allison

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

4330 Versailles

Dallas, TX 75205

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 13**2** FILER NAME

carolyn k arnold

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

05/08/2021

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

Pete Schenkel

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

P.O. Box 765096

Dallas, TX 75376

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

Date

05/21/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Roland Parrish self

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

400 Zang

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/21/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jewel K Parrish self

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

1256 Regents Park

Dallas, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/05/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

JoAnna DeAngelo

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

3221 Redbird

Grand , TX 76051

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 13**2** FILER NAME

carolyn k arnold

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

05/11/2021

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

Eric Johnson self

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

1010 Tyler

Dallas, TX 75224

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

Date

05/26/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Hub Baker self

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

180 Gail

Weatherford, TX 76085

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/25/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lucious William self

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1421 Covington

DeSoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/20/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dallas Firefighters Dallas Firefighters Association

Amount of contribution (\$)

2500.00

Contributor address;

City; State; Zip Code

10956 Audelia

Dallas, TX 75243

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

carolyn k arnold

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

05/05/2021

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

Frank Mihalopoulos

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

3932 Potomac

Dallas, TX 75205

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

Date

05/06/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dal Nam

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

4404 Windsor Ridge

Irving, TX 75038

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/04/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James Lee self

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

616 Scenic Dr

Irving, TX 75039

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/14/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Stuart Crow self

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

6310 Mercedes

Dallas, TX 75214

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 13**2** FILER NAME

carolyn k arnold

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

05/14/2021

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

Robert Crow

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

4612 Wataugua

Dallas, TX 75209

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

Date

05/10/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Katherine Crow self

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

4700 Preston

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/13/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jane Valach self

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

5 Lazee

Houston, TX 77024

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/03/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gilbert Aranza self

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

P.O. Box 601527

Dallas, TX 75360

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 13**2** FILER NAME

carolyn k arnold

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

04/29/2021

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

Roselinda Aranza self

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

3445 University

Dallas, TX 75205

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

Date

04/24/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bishop Dwayne

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1035 Astaire

Duncanville, TX 75138

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/24/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Deanna Hill self

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

P.O. Box 383162

Duncanville, TX 75138

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/22/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

ken smith self

Amount of contribution (\$)

196.00

Contributor address;

City; State; Zip Code

4615 Bradshaw

Dallas, TX 75215

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 13**2** FILER NAME

carolyn k arnold

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

04/25/2021

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

Russell Wilson self

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

1910 Pacific Suite 15100

Dallas, TX 75201

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

Date

05/22/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Clifton Miller self

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

2600 Southlake Blvd

Southlake, TX 76092

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/03/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ronald Steinhardt self

Amount of contribution (\$)

300.00

Contributor address;

City; State; Zip Code

25 Robledo Dr

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/24/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sergio Cazares self

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

2512 Exposition

Austin, TX 78703

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 13

2 FILER NAME

carolyn k arnold

3 Filer ID (Ethics Commission Filers)

4 Date

04/24/2021

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Debbie Branson self

6 Contributor address;

City; State; Zip Code

6920 Turtle Creek Blvd

Dallas, TX 75205

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/25/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Snell self

Contributor address;

City; State; Zip Code

800 Sam Davis

Argyle, TX 76226

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/26/2021

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kristian Teleki self

Contributor address;

City; State; Zip Code

235 Canyon Oaks

Argyle, TX 76226

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Contributor address;

City; State; Zip Code

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 4		2 FILER NAME carolyn k arnold		3 Filer ID (Ethics Commission Filers)	
4 Date 04/28/2021		5 Payee name Nethal Jackson NBJ&Associates			
6 Amount (\$) 3500.00		7 Payee address; City; State; Zip Code 2851 Toluca Dallas, TX 75224			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name carolyn king arnold		Office sought Council District 4	
Date 05/25/2021		Payee name LaShun Virdin S&J Associates			
Amount (\$) 1100.00		Payee address; City; State; Zip Code 3425 Hacienda Dallas, TX 75233			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	
Date 05/26/2021		Payee name Reilly Reilly Echols			
Amount (\$) 2792.00		Payee address; City; State; Zip Code 1710 Harwood Dallas, TX 75215			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	
				Office held Dallas City Council	

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 4		2 FILER NAME carolyn k arnold		3 Filer ID (Ethics Commission Filers)	
4 Date 05/26/2021		5 Payee name Jeff Ross The Order Desk			
6 Amount (\$) 1223.54		7 Payee address; City; State; Zip Code 9840 Monroe Dr Suite 100 Dallas, TX 75220			
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 n/a	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	Office held Dallas City Council
Date 05/12/2021		Payee name Freida Keglar Keglar&Associates			
Amount (\$) 1500.00		Payee address; City; State; Zip Code 1626 Mentor Dallas, TX 75216			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	Office held Dallas City Council
Date 05/15/2021		Payee name Crickett Crickett Crickett Wireless			
Amount (\$) 125.00		Payee address; City; State; Zip Code 3200 Lancaster Dallas, TX 75216			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	Office held Dallas City Council

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 4		2 FILER NAME carolyn k arnold		3 Filer ID (Ethics Commission Filers)	
4 Date 05/23/2021		5 Payee name CCP Printing CCPPrinting			
6 Amount (\$) 150.00		7 Payee address; City; State; Zip Code 5534 S. Hampton Dallas, TX 75232			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	
				Office held Dallas City Council	
Date 05/05/2021		Payee name Josh Cogan Cogan			
Amount (\$) 1000.00		Payee address; City; State; Zip Code 2320 Canton Suite 1133 Dallas, TX 75201			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	
				Office held Dallas City Council	
Date 05/05/2021		Payee name Darryl Blair Elite News			
Amount (\$) 500.00		Payee address; City; State; Zip Code 3155 S. Lancaster Suite 200 Dallas, TX 75216			
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 n/a	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	
				Office held Dallas City Council	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4 of 4		2 FILER NAME carolyn k arnold		3 Filer ID (Ethics Commission Filers)	
4 Date 05/12/2021		5 Payee name General Dollar General Dollar			
6 Amount (\$) 110.00		7 Payee address; City; State; Zip Code 3936 Polk Street Dallas, TX 75232			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 n/a	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	
				Office held Dallas City Council	
Date 05/20/2021		Payee name Quik Trip Quik Trip			
Amount (\$) 110.00		Payee address; City; State; Zip Code 4767 S. RLThorton Dallas, TX 75232			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	
				Office held Dallas City Council	
Date 05/06/2021		Payee name Kat Nealy Nealy Group			
Amount (\$) 2500.00		Payee address; City; State; Zip Code P.O. Box 191803 Dallas, TX 75219			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Polling Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	
				Office held Dallas City Council	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Supplemental Report Officeholder

FORM Cover Sheet SR

1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI		2. Total Pages Filed: 18
		carolyn k			
	NICKNAME	LAST	SUFFIX		3. Office Held Dallas City Council District 4
		arnold			
4. SUPPLEMENTAL REPORT TYPE	<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> January 15 <input type="checkbox"/> July 15 </div> <div> <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election </div> <div> <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 limit </div> <div> <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> Final Report </div> </div>				
5. PERIOD / COVERED	4/22/2021 THROUGH 5/26/2021				
6. ELECTION	<div style="display: flex; justify-content: space-between;"> <div>Month Day Year</div> <div>6/5/2021</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> N/A </div>				
7. OFFICE-HOLDER	CONTRIBUTION TOTALS	1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED			\$ 0.00
		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			\$ 0.00
	EXPENDITURE TOTALS	3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED			\$ 0.00
		4. TOTAL OFFICEHOLDER EXPENDITURES			\$ 0.00
8. POLITICAL (Campaign)	CONTRIBUTION TOTALS	5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED			\$ 0.00
		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			\$ 40,796.00
	EXPENDITURE TOTALS	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED			\$ 0.00
		8. TOTAL POLITICAL EXPENDITURES			\$ 14,610.54
9. OFFICEHOLDER FUNDS USED FOR CAMPAIGN PURPOSES	9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIBUTIONS USED FOR CAMPAIGN EXPENDITURES DURING THE REPORTING PERIOD			\$ 0.00	
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <p>10. AFFIDAVIT</p> <p style="margin-top: 20px;">AFFIX NOTARY STAMP / SEAL ABOVE</p> </div> <div style="width: 55%; text-align: center;"> <p>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.</p> <p style="margin-top: 20px;">***ELECTRONICALLY CERTIFIED***</p> <p>_____ Signature of Candidate or Officeholder</p> </div> </div>					
<p>Sworn to and subscribed before me, by the said <u>carolyn k arnold</u>, this the <u>28th</u> day of <u>May</u>, 20 <u>21</u>, to certify which, witness my hand and seal of office.</p>					
<div style="display: flex; justify-content: space-between;"> <div>Signature of officer administering oath</div> <div>Printed name of officer administering oath</div> <div>Title of officer administering oath</div> </div>					

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

carolyn k arnold

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

05/10/2021

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

Harlon Crow Self

6 Contributor address;

City; State; Zip Code

3819 Maple

Dallas, TX 75219

7 Amount of contribution (\$)

1000.00

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

Date

05/19/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Apartment Assoc Apartment Assoc Apartment Assoc

Contributor address;

City; State; Zip Code

5729 LBJ Freeway

Dallas, TX 75240

Amount of contribution (\$)

1500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/14/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ron Bivins self

Contributor address;

City; State; Zip Code

111 Hampton

Dallas, TX 75115

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/15/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Price self

Contributor address;

City; State; Zip Code

P.O. Box 224725

Dallas, TX 75222

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

carolyn k arnold

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

05/12/2021

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

Pamela Gates self

6 Contributor address;

City; State; Zip Code

1357 Bar Harbor

Dallas, TX 75232

7 Amount of contribution (\$)

200.00

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

Date

05/04/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

MetroTex MetroTex Metro-Texas

Contributor address;

City; State; Zip Code

8201 N. Stemmons

Dallas, TX 75247

Amount of contribution (\$)

2500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/11/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Richard LeBlanc LeBlanc

Contributor address;

City; State; Zip Code

3001 Knox Suite 405

Dallas, TX 75205

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/23/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Beuck self

Contributor address;

City; State; Zip Code

3663 Asbury

Dallas, TX 76206

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

carolyn k arnold

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

05/25/2021

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

William Beuck II self

6 Contributor address;

City; State; Zip Code

1514 Sunset Terr

Ft Worth, TX 76102

7 Amount of contribution (\$)

1000.00

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

Date

05/26/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Martha Baker self

Contributor address;

City; State; Zip Code

180 Gail

Weatherford, TX 76085

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/25/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jennifer Gates self

Contributor address;

City; State; Zip Code

4914 Keyhole

Dallas, TX 75229

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/24/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Dean self

Contributor address;

City; State; Zip Code

P.O. Box 140039

Dallas, TX 75214

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:
4 of 13**2** FILER NAME

carolyn k arnold

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

05/13/2021

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

Michael Rawlings self

6 Contributor address;

City; State; Zip Code

3879 Maple Ave

Dallas, TX 75219

7 Amount of contribution (\$)

500.00

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

Date

05/26/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robert Pitre self

Contributor address;

City; State; Zip Code

2642 Harwood

Dallas, TX 75215

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/21/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Helen Giddings

Contributor address;

City; State; Zip Code

400 zang

Dallas, TX 75208

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/21/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Richard Knight self

Contributor address;

City; State; Zip Code

6108 Redbird

Dallas, TX 75232

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:
5 of 13**2** FILER NAME

carolyn k arnold

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

05/24/2021

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

Bridget Lopez self

6 Contributor address;

City; State; Zip Code

4326 Meadow Lark

Dallas, TX 75229

7 Amount of contribution (\$)

500.00

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

Date

05/25/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Billy Allen self

Contributor address;

City; State; Zip Code

830 Misty Glen

Dallas, TX 75232

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/25/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mae Beck self

Contributor address;

City; State; Zip Code

611 Brook Valley

Dallas, TX 75232

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/06/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

TREC TREC Real Estate

Contributor address;

City; State; Zip Code

3100 McKinnon

Dallas, TX 75201

Amount of contribution (\$)

2500.00

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 13**2** FILER NAME

carolyn k arnold

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

05/26/2021

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

Hector Gonzalez Sierra Political Committee

6 Contributor address;

City; State; Zip Code

615 Willow

Dallas, TX 78202

7 Amount of contribution (\$)

250.00

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

Date

05/17/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Johnnie King self

Contributor address;

City; State; Zip Code

1243 Pleasant

Dallas, TX 75115

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/15/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dennis Gillespie

Contributor address;

City; State; Zip Code

910 Green Castle

Dallas, TX 75232

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/27/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Virginia Allison

Contributor address;

City; State; Zip Code

4330 Versailles

Dallas, TX 75205

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7 of 13

2 FILER NAME

carolyn k arnold

3 Filer ID (Ethics Commission Filers)

4 Date

05/08/2021

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Pete Schenkel

6 Contributor address;

City; State; Zip Code

P.O. Box 765096

Dallas, TX 75376

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/21/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Roland Parrish self

Contributor address;

City; State; Zip Code

400 Zang

Dallas, TX 75208

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/21/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jewel K Parrish self

Contributor address;

City; State; Zip Code

1256 Regents Park

Dallas, TX 75115

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/05/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

JoAnna DeAngelo

Contributor address;

City; State; Zip Code

3221 Redbird

Grand , TX 76051

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

carolyn k arnold

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

05/11/2021

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

Eric Johnson self

6 Contributor address;

City; State; Zip Code

1010 Tyler

Dallas, TX 75224

7 Amount of contribution (\$)

1000.00

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

Date

05/26/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Hub Baker self

Contributor address;

City; State; Zip Code

180 Gail

Weatherford, TX 76085

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/25/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lucious William self

Contributor address;

City; State; Zip Code

1421 Covington

DeSoto, TX 75115

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/20/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dallas Firefighters Dallas Firefighters Association

Contributor address;

City; State; Zip Code

10956 Audelia

Dallas, TX 75243

Amount of contribution (\$)

2500.00

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 13**2** FILER NAME

carolyn k arnold

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

05/05/2021

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

Frank Mihalopoulos

6 Contributor address;

City; State; Zip Code

3932 Potomac

Dallas, TX 75205

7 Amount of contribution (\$)

1000.00

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

Date

05/06/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dal Nam

Contributor address;

City; State; Zip Code

4404 Windsor Ridge

Irving, TX 75038

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/04/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James Lee self

Contributor address;

City; State; Zip Code

616 Scenic Dr

Irving, TX 75039

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/14/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Stuart Crow self

Contributor address;

City; State; Zip Code

6310 Mercedes

Dallas, TX 75214

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

carolyn k arnold

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

05/14/2021

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

Robert Crow

6 Contributor address;

City; State; Zip Code

4612 Wataugua

Dallas, TX 75209

7 Amount of contribution (\$)

1000.00

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

Date

05/10/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Katherine Crow self

Contributor address;

City; State; Zip Code

4700 Preston

Dallas, TX 75205

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/13/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jane Valach self

Contributor address;

City; State; Zip Code

5 Lazee

Houston, TX 77024

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/03/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gilbert Aranza self

Contributor address;

City; State; Zip Code

P.O. Box 601527

Dallas, TX 75360

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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 13**2** FILER NAME

carolyn k arnold

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

04/29/2021

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

Roselinda Aranza self

6 Contributor address;

City; State; Zip Code

3445 University

Dallas, TX 75205

7 Amount of contribution (\$)

1000.00

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

Date

04/24/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bishop Dwayne

Contributor address;

City; State; Zip Code

1035 Astaire

Duncanville, TX 75138

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/24/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Deanna Hill self

Contributor address;

City; State; Zip Code

P.O. Box 383162

Duncanville, TX 75138

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/22/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

ken smith self

Contributor address;

City; State; Zip Code

4615 Bradshaw

Dallas, TX 75215

Amount of contribution (\$)

196.00

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 13**2** FILER NAME

carolyn k arnold

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

04/25/2021

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

Russell Wilson self

6 Contributor address;

City; State; Zip Code

1910 Pacific Suite 15100

Dallas, TX 75201

7 Amount of contribution (\$)

250.00

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

Date

05/22/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Clifton Miller self

Contributor address;

City; State; Zip Code

2600 Southlake Blvd

Southlake, TX 76092

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/03/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ronald Steinhardt self

Contributor address;

City; State; Zip Code

25 Robledo Dr

Dallas, TX 75230

Amount of contribution (\$)

300.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/24/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sergio Cazares self

Contributor address;

City; State; Zip Code

2512 Exposition

Austin, TX 78703

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 13**2** FILER NAME

carolyn k arnold

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

04/24/2021

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

Debbie Branson self

6 Contributor address;

City; State; Zip Code

6920 Turtle Creek Blvd

Dallas, TX 75205

7 Amount of contribution (\$)

1000.00

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

Date

04/25/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Snell self

Contributor address;

City; State; Zip Code

800 Sam Davis

Argyle, TX 76226

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/26/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kristian Teleki self

Contributor address;

City; State; Zip Code

235 Canyon Oaks

Argyle, TX 76226

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Contributor address;

City; State; Zip Code

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 4		2 FILER NAME carolyn k arnold		3 Filer ID (Ethics Commission Filers)	
4 Date 04/28/2021		5 Payee name Nethal Jackson NBJ&Associates			
6 Amount (\$) 3500.00 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 2851 Toluca Dallas, TX 75224			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name carolyn king arnold		Office sought Council District 4	
Date 05/25/2021		Payee name LaShun Virdin S&J Associates			
Amount (\$) 1100.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 3425 Hacienda Dallas, TX 75233			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	
Date 05/26/2021		Payee name Reilly Reilly Echols			
Amount (\$) 2792.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 1710 Harwood Dallas, TX 75215			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	
				Office held Dallas City Council	

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 4		2 FILER NAME carolyn k arnold		3 Filer ID (Ethics Commission Filers)	
4 Date 05/26/2021		5 Payee name Jeff Ross The Order Desk			
6 Amount (\$) 1223.54 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 9840 Monroe Dr Suite 100 Dallas, TX 75220			
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 n/a	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	Office held Dallas City Council
Date 05/12/2021		Payee name Freida Keglars Keglars & Associates			
Amount (\$) 1500.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 1626 Mentor Dallas, TX 75216			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	Office held Dallas City Council
Date 05/15/2021		Payee name Crickett Crickett Crickett Wireless			
Amount (\$) 125.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 3200 Lancaster Dallas, TX 75216			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	Office held Dallas City Council

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 4		2 FILER NAME carolyn k arnold		3 Filer ID (Ethics Commission Filers)	
4 Date 05/23/2021		5 Payee name CCP Printing CCPPrinting			
6 Amount (\$) 150.00 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 5534 S. Hampton Dallas, TX 75232			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	Office held Dallas City Council
Date 05/05/2021		Payee name Josh Cogan Cogan			
Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 2320 Canton Suite 1133 Dallas, TX 75201			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	Office held Dallas City Council
Date 05/05/2021		Payee name Darryl Blair Elite News			
Amount (\$) 500.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 3155 S. Lancaster Suite 210 Dallas, TX 75216			
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 n/a	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4	Office held Dallas City Council

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4 of 4		2 FILER NAME carolyn k arnold		3 Filer ID (Ethics Commission Filers)	
4 Date 05/12/2021		5 Payee name General Dollar General Dollar			
6 Amount (\$) 110.00 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 3936 Polk Street Dallas, TX 75232			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 n/a	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4 Office held Dallas City Council	
Date 05/20/2021		Payee name Quik Trip Quik Trip			
Amount (\$) 110.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 4767 S. RLThorton Dallas, TX 75232			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4 Office held Dallas City Council	
Date 05/06/2021		Payee name Kat Nealy Nealy Group			
Amount (\$) 2500.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code P.O. Box 191803 Dallas, TX 75219			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Polling Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense n/a	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Carolyn King Arnold		Office sought Council District 4 Office held Dallas City Council	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED