

Supplemental Report Officeholder

FORM Cover Sheet SR

| | | | | |
|--|--|--|--------|--|
| 1. CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR | FIRST Cara | MI | 2. Total Pages Filed: 14 |
| | NICKNAME | LAST Mendelsohn | SUFFIX | 3. Office Held Council District 12 |
| 4. SUPPLEMENTAL REPORT TYPE | <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report | | | |
| 5. PERIOD / COVERED | 7/1/2020 THROUGH 12/31/2020 | | | |
| 6. ELECTION | Month Day Year 5/1/2021 <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> N/A | | | |
| 7. OFFICE-HOLDER | CONTRIBUTION TOTALS | 1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | | \$ 0.00 |
| | | 2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | \$ 0.00 |
| | EXPENDITURE TOTALS | 3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | | \$ 0.00 |
| | | 4. TOTAL OFFICEHOLDER EXPENDITURES | | \$ 0.00 |
| 8. POLITICAL (Campaign) | CONTRIBUTION TOTALS | 5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | | \$ 0.00 |
| | | 6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | \$ 12,103.00 |
| | EXPENDITURE TOTALS | 7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED | | \$ 0.00 |
| | | 8. TOTAL POLITICAL EXPENDITURES | | \$ 56.57 |
| 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> <p>10. AFFIDAVIT</p> <p style="margin-top: 20px;">AFFIX NOTARY STAMP / SEAL ABOVE</p> </div> <div style="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>***ELECTRONICALLY CERTIFIED***</p> <p>_____ Signature of Candidate or Officeholder</p> </div> </div> <div style="margin-top: 20px;"> <p>Sworn to and subscribed before me, by the said <u>Cara Mendelsohn</u>, this the <u>14th</u> day of <u>January</u>, 20 <u>21</u>, to certify which, witness my hand and seal of office.</p> </div> | | | | |
| <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 11**2** FILER NAME

Cara Mendelsohn

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

09/13/2020

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

CHRIS CULAK

6 Contributor address;

City; State; Zip Code

1223 KINGS HWY

Dallas, TX 75208

7 Amount of contribution (\$)

100.00

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

Date

10/24/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Collene Goldman

Contributor address;

City; State; Zip Code

3131 Maple Ave Suite 8E

Dallas, TX 75201

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/19/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jocelyn Ickes

Contributor address;

City; State; Zip Code

7023 Wester Way

Dallas, TX 75248

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/19/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Maura Schreier-Fleming

Contributor address;

City; State; Zip Code

7028 Judi St

Dallas, TX 75252

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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

Cara Mendelsohn

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

11/19/2020

Campaign
Contribution**5** Full name of contributor

Benjamin Nise

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

7020 Mumford St

City; State; Zip Code

Dallas, TX 75252

7 Amount of contribution (\$)

200.00

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

Date

12/13/2020

Campaign
Contribution

Full name of contributor

Keith Mond

☐ out-of-state PAC (ID#: _____)

Contributor address;

6101 Ohio Dr.

City; State; Zip Code

Plano, TX 75024

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date

12/15/2020

Campaign
Contribution

Full name of contributor

Cooper Global Ventures LLC

☐ out-of-state PAC (ID#: _____)

Contributor address;

5916 Castlebar Lane

City; State; Zip Code

Plano, TX 75093

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/15/2020

Campaign
Contribution

Full name of contributor

Ann Margolin

☐ out-of-state PAC (ID#: _____)

Contributor address;

2828 Hood St. Suite 1604

City; State; Zip Code

Dallas, TX 75219

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:
3 of 11

2 FILER NAME

Cara Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 Date

12/15/2020

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dawn Strauss

6 Contributor address;

City; State; Zip Code

17202 Graystone Dr

Dallas, TX 75248

7 Amount of contribution (\$)

18.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/15/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jerry Crawford

Contributor address;

City; State; Zip Code

7001 Duffield Dr

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/15/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kristine Schwope

Contributor address;

City; State; Zip Code

16230 Amberwood Rd

Dallas, TX 75248

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/15/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Charles Cayce

Contributor address;

City; State; Zip Code

6036 Jereme Trl

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:
4 of 11

2 FILER NAME

Cara Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 Date

12/15/2020

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jandis Price

6 Contributor address;

City; State; Zip Code

18216 Muir Cir

Dallas, TX 75287

7 Amount of contribution (\$)

200.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/15/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tarek Radjef

Contributor address;

City; State; Zip Code

4401 Windward Cir

Dallas, TX 75287

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/15/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Alan Tolmas

Contributor address;

City; State; Zip Code

6009 Oakcrest Rd

Dallas, TX 75248

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/15/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Matthew Talley

Contributor address;

City; State; Zip Code

3729 Normandy Ave

Dallas, TX 75205

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:
5 of 11**2** FILER NAME

Cara Mendelsohn

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

12/15/2020

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

Wade Thunhorst

6 Contributor address;

City; State; Zip Code

7222 Arbor Oaks Dr

Dallas, TX 75248

7 Amount of contribution (\$)

50.00

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

Date

12/15/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Rodney Schlosser

Contributor address;

City; State; Zip Code

6336 Tulip Ln

Dallas, TX 75230

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/15/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sally Wolfish

Contributor address;

City; State; Zip Code

6411 Riverview Suite Ln

Dallas, TX 75248

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/16/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bilco Corporation

Contributor address;

City; State; Zip Code

2116 N. Lancaster-Hutchins Road

Lancaster, TX 75134

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:
6 of 11

2 FILER NAME

Cara Mendelsohn

3 Filer ID (Ethics Commission Filers)

4 Date

12/16/2020

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lisa B Gill

6 Contributor address;

City; State; Zip Code

5905 Still Forest Dr

Dallas, TX 75252

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/17/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kimberly Ramirez

Contributor address;

City; State; Zip Code

16056 Longvista Dr

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/17/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Ohrt

Contributor address;

City; State; Zip Code

7112 Halprin Ct

Dallas, TX 75252

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/17/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Adam Mandel

Contributor address;

City; State; Zip Code

6527 Wickerwood 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:
7 of 11**2** FILER NAME

Cara Mendelsohn

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

12/18/2020

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

Telisa Schelin

6 Contributor address;

City; State; Zip Code

7302 Hiddencreek Dr

Dallas, TX 75252

7 Amount of contribution (\$)

100.00

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

Date

12/22/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jo Zeffren

Contributor address;

City; State; Zip Code

7774 El Pastel Dr

Dallas, TX 75248

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/24/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Stephen Suprun

Contributor address;

City; State; Zip Code

10541 Sandpiper Ln

Dallas, TX 75230

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/26/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: TX _____)

Sherry Goldberg

Contributor address;

City; State; Zip Code

4 Robledo Drive

Dallas, TX 75230

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)
RetiredEmployer (See Instructions)
Retired**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 11**2** FILER NAME

Cara Mendelsohn

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

12/28/2020

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

Casey McManemin

6 Contributor address;

City; State; Zip Code

5145 Yolanda Suite Ln

Dallas, TX 75229

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)
CEO**9** Employer (See Instructions)
Dorchester Minerals LP

Date

12/30/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris Heinbaugh

Contributor address;

City; State; Zip Code

1801 Annex Ave Suite 507

Dallas, TX 75204

Amount of contribution (\$)

35.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/30/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Willis Johnson

Contributor address;

City; State; Zip Code

1001 Belleview St Suite P1

Dallas, TX 75215

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mark Goodman

Contributor address;

City; State; Zip Code

6506 Redpine Rd

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:
9 of 11**2** FILER NAME

Cara Mendelsohn

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

12/31/2020

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

Judy Foxman

6 Contributor address;

City; State; Zip Code

6901 Mckamy Blvd

Dallas, TX 75248

7 Amount of contribution (\$)

250.00

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

Date

12/31/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Cindy & Irv Munn

Contributor address;

City; State; Zip Code

18015 Rock Branch Dr

Dallas, TX 75287

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bill 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

12/17/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Allyn and Susan Kramer

Contributor address;

City; State; Zip Code

5928 Twin Coves St

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:
10 of 11**2** FILER NAME

Cara Mendelsohn

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

12/24/2020

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

Josh and Beth Mond

6 Contributor address;

City; State; Zip Code

7314 Debbe Dr

Dallas, TX 75252

7 Amount of contribution (\$)

500.00

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

Date

12/15/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Frank Taylor

Contributor address;

City; State; Zip Code

5328 Stone Falls Ln

Dallas, TX 75287

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/19/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Donna and Frank Magro

Contributor address;

City; State; Zip Code

7315 Highland Heather

Dallas, TX 75248

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/15/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Barbara L Carr

Contributor address;

City; State; Zip Code

6607 Missy Dr

Dallas, TX 75252

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 11**2** FILER NAME

Cara Mendelsohn

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

12/15/2020

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

James R. and Sonia A. Brown

6 Contributor address;

City; State; Zip Code

16805 Deer Park Dr

Dallas, TX 75248

7 Amount of contribution (\$)

50.00

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

Date

12/15/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kim Williams

Contributor address;

City; State; Zip Code

6635 Crestland Ave

Dallas, TX 75252

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/22/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jeffrey L and Janet S Beck

Contributor address;

City; State; Zip Code

6211 Raintree Ct

Dallas, TX 75254

Amount of contribution (\$)

2000.00

Principal occupation / Job title (See Instructions)
ChairmanEmployer (See Instructions)
Beck Ventures

Date

10/21/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mary Poss

Contributor address;

City; State; Zip Code

6405 Mercedes Ave

Dallas, TX 75214

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)
RealtorEmployer (See Instructions)
Ebby Halliday**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

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 1 | 2 FILER NAME Cara Mendelsohn | 3 Filer ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | | \$ |
| 5 Date 12/25/2020 | 6 Payee name Go Daddy | |
| 7 Amount (\$) 12.17 Campaign Funds for Campaign Expenditures | 8 Payee address; City; State; Zip Code 14455 N Hayden Rd Suite 219 Scottsdale, AZ 85260 | |
| 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) Domain Name | (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 |
| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought Office held |
| Date 11/07/2020 | Payee name Therapy Dog Vest | |
| Amount (\$) 44.40 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 9108 Ripley St Fort Worth, TX 76244 | |
| 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 Dog Vest |
| 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 1 | 2 FILER NAME Cara Mendelsohn | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/11/2020 | 5 Payee name Master Card - Citi | |
| 6 Amount (\$) 44.40 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 payment for Dog Vest |
| 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 | | |