

# Supplemental Report Officeholder

# FORM Cover Sheet SR

1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>Dr</b>	FIRST <b>Carolyn</b>	MI	2. Total Pages Filed: <b>7</b>
	NICKNAME	LAST <b>Arnold</b>	SUFFIX	3. Office Held <b>City Council D4</b>
4. SUPPLEMENTAL REPORT TYPE	<div style="display: flex; justify-content: space-between;"> <span>c January 15</span> <span><input checked="" type="checkbox"/> 30th day before election</span> <span>c Runoff</span> <span>c 15th day after campaign treasurer appointment (officeholder only)</span> </div> <div style="display: flex; justify-content: space-between;"> <span>c July 15</span> <span>c 8th day before election</span> <span>c Exceeded \$500 limit</span> <span>c Final Report</span> </div>			
5. PERIOD / COVERED	1/1/2023 THROUGH 3/27/2023			
6. ELECTION	<div style="display: flex; justify-content: space-between;"> <span>Month Day Year</span> </div> <div style="display: flex; justify-content: space-between;"> <span>5/6/2023</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <span>c Primary</span> <span>c Runoff</span> <span>c General</span> <span>c Special</span> <span><input checked="" type="checkbox"/> N/A</span> </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)		\$ 3,900.00
	EXPENDITURE TOTALS	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 0.00
		8. TOTAL POLITICAL EXPENDITURES		\$ 12,495.74
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>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>***ELECTRONICALLY CERTIFIED***</p> <p>_____ Signature of Candidate or Officeholder</p> </div> </div>				
<p>Sworn to and subscribed before me, by the said <u>Dr Carolyn Arnold</u>, this the <u>6th</u> day of <u>April</u>, 20 <u>23</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>				

## SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 1 of 3
2 FILER NAME Dr Carolyn Arnold		3 Filer ID (Ethics Commission Filers)
4 Date 03/10/2023  Campaign Contribution  self	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henri Wilson self ..... 6 Contributor address; City; State; Zip Code 505 Brook Valley Ln Dallas, TX 75232	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/23/2023  Campaign Contribution  self	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez Bridget self ..... Contributor address; City; State; Zip Code 4322 Meadowdale Dallas, TX 75229	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/23/2023  Campaign Contribution  self	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennie 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 03/21/2023  Campaign Contribution  self	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norma Minnis self ..... Contributor address; City; State; Zip Code P.O. Box 140977 Dallas, TX 75214	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.		

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2 FILER NAME Dr Carolyn Arnold		3 Filer ID (Ethics Commission Filers)
4 Date 03/02/2023  Campaign Contribution  self	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karl Thompson self ..... 6 Contributor address; City; State; Zip Code 724 Brook Valley Dallas, TX 75232	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/23/2023  Campaign Contribution  self	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hector Flores self ..... Contributor address; City; State; Zip Code 1030 S. Zang Dallas, TX 75206	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/23/2023  Campaign Contribution  self	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenneth Smith self ..... Contributor address; City; State; Zip Code 4615 Bradshaw Dallas, TX 75215	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/23/2023  Campaign Contribution  self	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rene Martinez self ..... Contributor address; City; State; Zip Code 1007 Arbor Dallas, TX 75231	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 3 of 3
<b>2</b> FILER NAME Dr Carolyn Arnold		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 03/20/2023  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delva King self ..... <b>6</b> Contributor address; City; State; Zip Code 1230 W. Pleasant Run DeSoto, TX 75115	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions) self		<b>9</b> Employer (See Instructions) self
Date 03/21/2023  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evalynn Williams self ..... Contributor address; City; State; Zip Code 1104 Shadow Trail Dallas, TX 75115	Amount of contribution (\$) 800.00
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) self
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

### 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.

<b>1</b> Total pages Schedule F1: 1 of 3	<b>2</b> FILER NAME Dr Carolyn Arnold	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 02/06/2023	<b>5</b> Payee name Jeff Bouck Big Bang Media	
<b>6</b> Amount (\$) 400.00 Campaign Funds for Campaign Expenditures	<b>7</b> Payee address; City; State; Zip Code 103 NW 14th Grand Prairie, TX 75050	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description doorhangers
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 02/20/2023	Payee name Nethal Jackson NBJ and Associates	
Amount (\$) 1500.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 2851 Toluca Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Canvassing
	<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	Candidate / Officeholder name	Office sought Office held
Date 01/31/2023	Payee name Jeff Ross The OrderDesk	
Amount (\$) 835.70 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 9840 Monroe Dallas, TX 75220	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description mailer
	<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	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### 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.

<b>1</b> Total pages Schedule F1: 2 of 3	<b>2</b> FILER NAME Dr Carolyn Arnold	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 02/01/2023	<b>5</b> Payee name Jeff Dalton Democracy Toolbox	
<b>6</b> Amount (\$) 2000.00  Campaign Funds for Campaign Expenditures	<b>7</b> Payee address; City; State; Zip Code 8552 Royal County DowMcKinney, TX 75070	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description Campaign
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>		
Date  03/20/2023	Payee name  Jeff Dalton DemocracyToolbox	
Amount (\$) 1500.00  Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 8552 Royal County DowDallas, TX 75050	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense	Description campaign
	<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 <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>		
Date  03/27/2023	Payee name  jeff ross The Order Desk	
Amount (\$) 3809.04  Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 9840 Monroe Dr Dallas, TX 75220	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description mailer expenses
	<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 <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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Advertising Expense  
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Consulting Expense  
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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.

<b>1</b> Total pages Schedule F1: 3 of 3	<b>2</b> FILER NAME Dr Carolyn Arnold	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 03/15/2023	<b>5</b> Payee name Nethal Jackson NBJ & Associates	
<b>6</b> Amount (\$) 2451.00 Campaign Funds for Campaign Expenditures	<b>7</b> Payee address; 2851 Toluca Dallas, TX 75224 City; State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description Canvass Team
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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