CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	Filer ID (Ethics Comm	nission Filers)	2 Total pages filed: 20	OFFICE USE ONLY		
3	CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Caro NICKNAME LAST arno	SUFFIX	Date Received		
4	ORIGINAL REPORT TYPE	30th day before election 15th app	off Other (specify) seeded \$500 limit ———————————————————————————————————	Date Hand-delivered or Date Postmarked Receipt # Amount \$		
5	ORIGINAL PERIOD COVERED	Month Day Year 04 / 22 / 2021 TH	Month Day Year IROUGH 05 / 26 / 2021	Date Processed Date Imaged		
6	EXPLANATION OF CO	RRECTION				
	additionalupdate needed					
7	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	* * *		
Sworn to and subscribed before me, by the said carolyn k arnold subscribed before me, by the said carolyn k				Officeholder		
				oth day of May		
		which, witness my hand and seal of office				
_	Signature of officer add	ninistering oath Printed	I 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 G	uide 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 carolyn NICKNAME LAST arnold	MI kSUFFIX	OFFICE USE ONLY Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	835 Timber Dell D	Pallas TX 75232	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (214) -37 2194	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Barbara NICKNAME LAST Record	MISUFFIX	Receipt # Amount \$ Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SU 910 Stillmeadow	JITE #; CITY; STATE; Dallas TX 75232	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (214) 478 2160	EXTENSION	
9 REPORT TYPE	January 15 30th day before electrical Sulph 15 X 8th day before electrical X		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 04 / 22 / 2021	THROUGH 05	Day Year 26 2021
11 ELECTION	Month Day Year Primary 06 05 2021 General	Runoff Other Description Special	
12 OFFICE	OFFICE HELD (if any) Dallas City Council DIstrict 4	13 OFFICE SOUGHT (if known Council District 4	
	go то	PAGE 2	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME			15 Filer	ID (Ethics Commission Filers)
carolyn k arnold				
16 NOTICE FROM POLITICAL COMMITTEE(S)	EN MADE WITHOUT TI	ADE BY POLITICAL COMMITTEES TO HE CANDIDATE'S OR OFFICEHOLDER'S MATION ONLY IF THEY RECEIVE NOTICE		
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages				
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OT S, LOANS, OR GUARANTEES OF LOANS), UNLES		\$ 0.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF L	LOANS)	\$ 40796.00
EXPENDITURE TOTALS	1 3 IOTAL POLITICAL EXPENDITURES OF \$100 OR LESS			\$ 0.00
	4. TOTAL	POLITICAL EXPENDITURES		\$ 14610.54
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF T ORTING PERIOD	THE LAST DAY	\$ 0.00
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS Y OF THE REPORTING PERIOD	S AS OF THE	\$ 0.00
18 AFFIDAVIT		-	des all information	hat the accompanying report is n required to be reported by me
		ELECTRONIC	CALLY CERTII	FIED
		Signature	e of Candidate	or Officeholder
AFFIX NOTARY STAM	P/SEALABOVE			
Sworn to and subsc	ribed before me, k	y the said <u>carolyn k arnold</u>		, this the 28th
		o certify which, witness my hand and seal c		
Signature of officer a	administering oath	Printed name of officer administering oath	h Titl	le of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER N	mmission Filers)		
ca	arolyn k a			
21		JLE SUBTOTALS F SCHEDULE		SUBTOTAL AMOUNT
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 40,796.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00
4.	SCHEDULE E: LOANS			\$ 0.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			\$ 14,610.54
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			\$ 0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			\$ 0.00
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$ 0.00
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT RETURNED TO FILER	IONS	\$ 0.00

SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 1 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date	5 Full name of contributor out-of-state PAC (I	D#:)	7 Amount of contribution (\$)
05/10/2021	Harlon Crow Self		1000.00
	6 Contributor address; City; State;	Zip Code	
	3819 Maple Dallas, T	TX 75219	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
self		self	
Date	Full name of contributor	ID#:)	A
	Apartment Assoc Apartment Assoc Apartment		Amount of contribution (\$)
05/19/2021			1500.00
	Contributor address; City; State;		
	5729 LBJ Freeway Dallas, T	XX 75240	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
05/14/2021	Ron Bivins self		100.00
	Contributor address; City; State;	Zip Code	
		TX 75115	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of contribution (\$)
05/15/2021	John Price self		1000.00
	Contributor address; City; State;	Zip Code	
		TX 75222	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: 2 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date	5 Full name of contributor out-of-state_PAC (ID#:)	7 Amount of contribution (\$)
05/12/2021	Pamela Gates self		200.00
	6 Contributor address; City; State;	Zip Code	
	1357 Bar Harbor Dallas, T	ΓX 75232	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of contribution (\$)
05/04/2021	MetroTex MetroTex Metro-Texas		2500.00
03/01/2021	Contributor address; City; State;	Zip Code	2300.00
	8201 N. Stemmons Dallas, T	ΓX 75247	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
05/11/2021	Richard LeBlanc LeBlanc		1000.00
	Contributor address; City; State; 3001 Knox Suite 405 Dallas, T	Zip Code ΓX 75205	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
05/23/2021	William Beuck self		1000.00
		Zip Code ΓX 76206	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 3 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
05/25/2021	William Beuck II self		1000.00
	6 Contributor address; City; State;	Zip Code	
	1514 Sunset Terr Ft Wort	th, TX 76102	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			ions)
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
05/26/2021	Martha Baker self		1000.00
03/20/2021	Contributor address; City; State;	Zip Code	1000.00
	180 Gail Weather	rford, TX 76085	
Principal occur	ation / Job title (See Instructions)	Employer (See Instruct	ione)
i illicipal occup	ation 7 oob title (See Instructions)	Employer (See instruct	ions
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
05/25/2021	Jennifer Gates self		500.00
03/23/2021	Contributor address; City; State;	300.00	
	•	Zip Code TX 75229	
Principal occur	nation / Job title (See Instructions)	Employer (See Instruct	ions)
. mopal occup			
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
05/24/2021	David Dean self		500.00
	Contributor address; City; State;	Zip Code	
	P.O. Box 140039 Dallas, 7	TX 75214	
Principal occup	vation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 4 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
05/13/2021	Michael Rawlings self		500.00
	6 Contributor address; City; State;	Zip Code	
	3879 Maple Ave Dallas,	TX 75219	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ione)
6 Filicipal occu	Jation / Job title (See Instructions)	9 Employer (See mstruct	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
05/26/2021	Robert Pitre self		500.00
05/26/2021	Contributor address; City; State;	Zip Code	500.00
		TX 75215	
	2042 Hai wood Danas,	1X 73213	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date		(ID#:)	Amount of contribution (\$)
05/21/2021	Helen Giddings		500.00
	Contributor address; City; State;	Zip Code	
	400 zang Dallas,	TX 75208	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
05/21/2021	Richard Knight self	(10#)	250.00
03/21/2021			230.00
	Contributor address; City; State; 6108 Redbird Dallas,	Zip Code TX 75232	
	oroo Redond Danas,	1X 13232	
Principal occur	pation / Job title (See Instructions)	Employer (See Instruct	ions)
	,		,

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 5 of 13				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
carolyn k arnold						
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)			
05/24/2021	Bridget Lopez self		500.00			
	6 Contributor address; City; State;	Zip Code				
	4326 Meadow Lark Dallas, 7	TX 75229				
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)			
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)			
05/25/2021	Billy Allen self		100.00			
	Contributor address; City; State;	Zip Code				
	830 Misty Glen Dallas, 7	TX 75232				
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)			
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)			
05/25/2021	Mae Beck self		100.00			
	Contributor address; City; State; 611 Brook Valley Dallas, 7	Zip Code TX 75232				
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)			
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)			
05/06/2021	TREC TREC Real Estate	,	2500.00			
		Zip Code TX 75201				
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)			

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 6 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)
05/26/2021	Hector Gonzalez Sierra Political Committee		250.00
	6 Contributor address; City; State;	Zip Code	
	615 Willow Dallas, T	ΓX 78202	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ione)
6 Fillicipal occu	Salion / Job title (See Instructions)	Employer (See instructi	10115)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
05/17/2021	Johnnie King self		1000.00
03/17/2021	Contributor address; City; State;	Zip Code	1000.00
		TX 75115	
	1245 Heasant Danas, 1	12 73113	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	ID#.	
Date		ID#:)	Amount of contribution (\$)
05/15/2021	Dennis Gillespie		50.00
	Contributor address; City; State;	·	
	910 Green Castle Dallas, T	TX 75232	
Principal coour	pation / Job title (See Instructions)	Employer (See Instructi	ional
Principal occup	ation / Job title (See Instructions)	Employer (See instructi	ions)
Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of contribution (\$)
04/27/2021	Virginia Allison		1000.00
	Contributor address; City; State;		
		ГX 75205	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	1 Total pages Schedule A1: 7 of 13		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
carolyn k arnold				
4 Date		ID#:)	7 Amount of contribution (\$)	
05/08/2021	Pete Schenkel		500.00	
	6 Contributor address; City; State;	Zip Code		
	P.O. Box 765096 Dallas, 7	ΓX 75376		
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	ID#:)	Amount of contribution (\$)	
05/21/2021	Roland Parrish self		1000.00	
03/21/2021	Contributor address; City; State;	Zip Code	1000.00	
	400 Zang Dallas, 7	ΓX 75208		
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)	
05/21/2021	Jewel K Parrish self		500.00	
00/21/2021	Contributor address; City; State;	Zip Code		
	1256 Regents Park Dallas, T	ΓX 75115		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	ID#·	Amount of contribution (\$)	
05/05/2021	JoAnna DeAngelo	, , , , , , , , , , , , , , , , , , , ,	50.00	
	Contributor address; City; State;			
		TX 76051		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)	

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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	5 Full name of contributor ☐ out-of-state PAC ☐ Eric Johnson self	(ID#:)	7 Amount of contribution (\$)
05/11/2021	6 Contributor address; City; State;	Zip Code	1000.00
	, , ,	TX 75224	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
05/26/2021	Hub Baker self		1000.00
	•		
	180 Gail Weather	erford, TX 76085	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
05/25/2021	Lucious William self		1000.00
	Contributor address; City; State; 1421 Covington DeSoto,	Zip Code , TX 75115	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
05/20/2021	Dallas Firefighters Dallas Firefighters Associ		2500.00
	Contributor address; City; State; 10956 Audelia Dallas,		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 9 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date	5 Full name of contributor uut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
05/05/2021	Frank Mihalopoulos		1000.00
	6 Contributor address; City; State;	Zip Code	
	3932 Potomac Dallas,	TX 75205	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
05/06/2021	Dal Nam		1000.00
03/00/2021	Contributor address; City; State;	Zip Code	1000.00
	4404 Windsor Ridge Irving, 7	ΓX 75038	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
05/04/2021	James Lee self		1000.00
	Contributor address; City; State; 616 Scenic Dr Irving,	Zip Code ΓX 75039	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
05/14/2021	Stuart Crow self		1000.00
	-	Zip Code TX 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 10 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date		(ID#:)	7 Amount of contribution (\$)
05/14/2021	Robert Crow		1000.00
	6 Contributor address; City; State;	Zip Code	
	4612 Wataugua Dallas, 7	TX 75209	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	iona)
• Filicipal occu	Jation / Job title (See Instructions)	g Employer (See instructi	ions)
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
05/10/2021	Katherine Crow self		1000.00
05/10/2021	Contributor address; City; State;	Zip Code	1000.00
		TX 75205	
	4700 Fleston Danas, 1	1X 73203	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date		(ID#:)	Amount of contribution (\$)
05/13/2021	Jane Valach self		500.00
	Contributor address; City; State;	Zip Code	
	5 Lazee Houston	n, TX 77024	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#-	Amount of contribution (ft)
	Gilbert Aranza self	(ID#:)	Amount of contribution (\$)
05/03/2021			1000.00
	Contributor address; City; State;		
	P.O. Box 601527 Dallas, 7	TX 75360	
Principal occur	pation / Job title (See Instructions)	Employer (See Instructi	ione)
i ilicipai occup	ation / oob title (Gee instructions)	Employer (See instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 11 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
04/29/2021	Roselinda Aranza self		1000.00
	6 Contributor address; City; State;	Zip Code	
	3445 University Dallas,	ΓX 75205	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
04/24/2021	Bishop Dwayne		1000.00
	Contributor address; City; State;	Zip Code	
	1035 Astaire Duncan	ville, TX 75138	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
04/24/2021	Deanna Hill self		1000.00
	Contributor address; City; State; P.O. Box 383162 Duncan	Zip Code ville, TX 75138	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#·	Amount of contribution (\$)
05/22/2021	ken smith self	, ,	196.00
		Zip Code ΓX 75215	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)

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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 8 Principal occu	Russell Wilson self 6 Contributor address; City; State; 1910 Pacific Suite 15100 Dallas,	; Zip Code TX 75201 9 Employer (See Instruct	7 Amount of contribution (\$) 250.00
• Timelpar occu	Salion / 300 title (Gee mandelions)	Employer (See instruct	10113)
Date 05/22/2021	Clifton Miller self Contributor address; City; State	z; Zip Code ake, TX 76092	Amount of contribution (\$) 250.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 05/03/2021	Ronald Steinhardt self Contributor address; City; State;	; Zip Code TX 75230	Amount of contribution (\$) 300.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 04/24/2021	Sergio Cazares self Contributor address; City; State		Amount of contribution (\$) 200.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 13 of 13	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date		(ID#:)	7 Amount of contribution (\$)
04/24/2021	Debbie Branson self		1000.00
	6 Contributor address; City; State;	Zip Code	
	6920 Turtle Creek Blvd Dallas,	TX 75205	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
04/25/2021	David Snell self		1000.00
0 1/23/2021	Contributor address; City; State;	Zip Code	1000.00
	800 Sam Davis Argyle,	TX 76226	
	1 - 2, - 3, - 3, - 3, - 3, - 3, - 3, - 3,		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
04/26/2021	Kristian Teleki self		1000.00
01/20/2021	Contributor address; City; State;		1000.00
	•	TX 76226	
	233 Carryon Gans Triggle,	171 70220	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
	Contributor address; City; State;	Zip Code	
Principal occur	ation / Job title (See Instructions)	Employer (See Instruct	ions)
	(222 1123 2313 113)		/

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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)

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1:		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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense n/a
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name carolyn king arnold	Office sought Office held 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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Carolyn King Arnold	Office sought Office held 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 Check if travel outside of Texas. Complete Schedule T. 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 Office held Council District 4 Dallas City Council
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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)

Credit Card Payment	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 1024allas, TX 75220	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense n/a
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Carolyn King Arnold	Office sought Office held Council District 4 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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense n/a
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Carolyn King Arnold	Office sought Office held Council District 4 Dallas City Council
Date 05/15/2021	Payee name 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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense n/a
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Carolyn King Arnold	Office sought Office held Council District 4 Dallas City Council
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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
Others (actions extensions thirted above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
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		tside of Texas. Complete Schedule T. , TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	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		side of Texas. Complete Schedule T. TX, officeholder living expense
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 05/05/2021	Payee name Darryl Blair Elite News		
Amount (\$) 500.00	Payee address; City; State; Zip Code 3155 S. Lancaster Suite 2001las, TX 75216		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		tside of Texas. Complete Schedule T. TX, officeholder living expense
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	S SCHEDULE AS NEE	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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)

Gredit Card Payment	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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense n/a
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Carolyn King Arnold	Office sought Office held Council District 4 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 Check if travel outside of Texas. Complete Schedule T. 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 Office held Council District 4 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 Check if travel outside of Texas. Complete Schedule T. 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 Office held Council District 4 Dallas City Council
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

City Secretary's Office

Supplement Officeholder	tal Report		FOR Cover She	MSR etSR
1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST MI carolyn k	2. Total Pages Filed: 18	
	NICKNAME	LAST SUFFIX arnold	3. Office Held Dallas City Coun	cil DIstrict 4
4. SUPPLEMENTAL REPORT TYPE	c January 15	c 30th day before election X Runoff	c 15th day after camp treasurer appointmen (officeholder only)	
	C July 15	c 8th day before election c Exceeded \$500 limit	c Final Report	
5. PERIOD / COVERED		4/22/2021 THROUGH 5/26/2021		
6. ELECTION	Month Day Year			
	6/5/2021	c Primary	General c Spe	cial c 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		\$ 0.00
		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$0.00		
	EXPENDITURE	3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$0.00		\$0.00
	TOTALS	4. TOTAL OFFICEHOLDER EXPENDITURES \$ 0.00		\$ 0.00
8. POLITICAL	CONTRIBUTION TOTALS	5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	•	\$0.00
(Campaign)		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 40,79		\$ 40,796.00
	EXPENDITURE	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED $$0.00$		\$ 0.00
	TOTALS	8. TOTAL POLITICAL EXPENDITURES \$ 14,610.5		\$ 14,610.54
9. OFFICEHOLDER FUN FOR CAMPAIGN PURI		9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIB CAMPAIGN EXPEND TURES DURING THE REPORTING PEI		\$ 0.00
10. AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election code.				
ELECTRONICALLY CERTIFIED				
AFFIX NOTARY STAMP / SEAL ABOVE Signature of Candidate or Officeholder				
Sworn to and subscribed l	pefore me, by the said <u>carol</u>	yn k arnold	this the 28th	day
		witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of officer adr	ministering oath

SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 1 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)
05/10/2021	Harlon Crow Self		1000.00
Campaign	6 Contributor address; City; State;	Zip Code	
Contribution	3819 Maple Dallas, T	TX 75219	
8 Principal occu	pation / Job title (See Instructions)		ions)
Sell		self	
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
05/19/2021	Apartment Assoc Apartment Assoc Apartmen	t Assoc	1500.00
Campaign	Contributor address; City; State;	Zip Code	
Contribution	5729 LBJ Freeway Dallas, T	TX 75240	
Principal occupation / Job title (See Instructions) Employer (See Instruc		Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
05/14/2021	Ron Bivins self		100.00
Campaign	Contributor address; City; State;	Zip Code	
Contribution	111 Hampton Dallas, T	TX 75115	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
05/15/2021	John Price self	,	1000.00
Campaign	Contributor address; City; State;	Zip Code	
Contribution	P.O. Box 224725 Dallas, T	TX 75222	
Principal coour	ation / Job title (See Instructions)	Employer (See Instruct	(ana)
Fillicipal occup	ation / Job title (See instructions)	Employer (See instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 2 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date	5 Full name of contributor out-of-state_PAC (ID#:)	7 Amount of contribution (\$)
05/12/2021	Pamela Gates self		200.00
Campaign	6 Contributor address; City; State;	Zip Code	
Contribution	1357 Bar Harbor Dallas, T	TX 75232	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
05/04/2021	MetroTex MetroTex Metro-Texas		2500.00
	Contributor address; City; State;	Zip Code	2500.00
Campaign Contribution	8201 N. Stemmons Dallas, T	TX 75247	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
05/11/2021	Richard LeBlanc LeBlanc		1000.00
Campaign Contribution	Contributor address; City; State; 3001 Knox Suite 405 Dallas, T	Zip Code FX 75205	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
05/23/2021	William Beuck self		1000.00
Campaign Contribution		Zip Code ΓX 76206	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 3 of 13				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
carolyn k arnold				
4 Date	5 Full name of contributor out-of-state PAC (ID	D#:)	7 Amount of contribution (\$)	
05/25/2021	William Beuck II self		1000.00	
Campaign	6 Contributor address; City; State;	Zip Code		
Contribution	1514 Sunset Terr Ft Worth,	, TX 76102		
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)	
Date	Full name of contributor ut-of-state PAC (IE	D#:)	Amount of contribution (\$)	
05/26/2021	Martha Baker self		1000.00	
Campaign	Contributor address; City; State;	Zip Code		
Contribution	180 Gail Weatherfo	ord, TX 76085		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)	
Date	Full name of contributor	D#:)	Amount of contribution (\$)	
05/25/2021	Jennifer Gates self		500.00	
Campaign Contribution	Contributor address; City; State; 4914 Keyhole Dallas, T.	Zip Code X 75229		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)	
Date	Full name of contributor	D#:)	Amount of contribution (\$)	
05/24/2021	David Dean self		500.00	
Campaign Contribution	Contributor address; City; State; P.O. Box 140039 Dallas, T.	Zip Code		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 4 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
05/13/2021	Michael Rawlings self		500.00
Campaign	6 Contributor address; City; State;	Zip Code	
Contribution	3879 Maple Ave Dallas, T	TX 75219	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
05/26/2021	Robert Pitre self		500.00
	Contributor address; City; State;	Zip Code	200.00
Campaign Contribution	2642 Harwood Dallas, T	TX 75215	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
05/21/2021	Helen Giddings		500.00
Campaign Contribution	Contributor address; City; State; 400 zang Dallas, 7	Zip Code TX 75208	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
05/21/2021	Richard Knight self		250.00
Campaign Contribution	Contributor address; City; State; 6108 Redbird Dallas, 7		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 5 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date	5 Full name of contributor □ out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
05/24/2021	Bridget Lopez self		500.00
Campaign	6 Contributor address; City; State;	Zip Code	
Contribution	4326 Meadow Lark Dallas,	TX 75229	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
05/25/2021	Billy Allen self		100.00
	Contributor address; City; State;	Zip Code	100.00
Campaign Contribution	830 Misty Glen Dallas,	TX 75232	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
05/25/2021	Mae Beck self		100.00
Campaign Contribution	Contributor address; City; State; 611 Brook Valley Dallas,	Zip Code TX 75232	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
05/06/2021	TREC TREC Real Estate		2500.00
Campaign Contribution	-	Zip Code TX 75201	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this for	m.	1 Total pages Schedule A1: 6 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date	5 Full name of contributor out-of-state_PAC (ID#	t:)	7 Amount of contribution (\$)
05/26/2021	Hector Gonzalez Sierra Political Committee		250.00
Campaign	6 Contributor address; City; State;	Zip Code	
Contribution	615 Willow Dallas, TX	X 78202	
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructi	ions)
Date	Full name of contributor	t:)	Amount of contribution (\$)
05/17/2021	Johnnie King self		1000.00
Campaign	Contributor address; City; State;	Zip Code	
Contribution	1243 Pleasant Dallas, TX	X 75115	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	t:)	Amount of contribution (\$)
05/15/2021	Dennis Gillespie		50.00
Campaign Contribution	Contributor address; City; State; 910 Green Castle Dallas, TX	Zip Code Z 75232	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	f:)	Amount of contribution (\$)
04/27/2021	Virginia Allison		1000.00
Campaign Contribution	Contributor address; City; State; 2 4330 Versailles Dallas, TX	Zip Code	
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 7 of 13				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
carolyn k arnold					
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)		
05/08/2021	Pete Schenkel		500.00		
	6 Contributor address; City; State	; Zip Code	300.00		
Campaign Contribution	P.O. Box 765096 Dallas,	TX 75376			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)		
o i incipal occu	Salion / 300 title (See instructions)	9 Employer (See mando	ilons)		
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)		
05/21/2021	Roland Parrish self		1000.00		
	Contributor address; City; State	; Zip Code			
Campaign Contribution	400 Zang Dallas,	TX 75208			
D. C. C. L.					
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	lons)		
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)		
05/21/2021	Jewel K Parrish self		500.00		
Campaign	Contributor address; City; State;	Zip Code			
Contribution	1256 Regents Park Dallas,	TX 75115			
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)		
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)		
05/05/2021	JoAnna DeAngelo		50.00		
Campaign	Contributor address; City; State	; Zip Code			
Contribution	3221 Redbird Grand,	TX 76051			
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)		

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SCHEDULE A1

The	The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 8 of 13				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
carolyn k arnold					
4 Date	5 Full name of contributor ut-of-state PAC (IE	D#:)	7 Amount of contribution (\$)		
05/11/2021	Eric Johnson self		1000.00		
Campaign	6 Contributor address; City; State;	Zip Code			
Contribution	1010 Tyler Dallas, T	X 75224			
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)		
Date	Full name of contributor	D#:)	Amount of contribution (\$)		
05/26/2021	Hub Baker self		1000.00		
Campaign	Contributor address; City; State;	Zip Code			
Contribution	180 Gail Weatherf	Ford, TX 76085			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)		
Date	Full name of contributor	D#:)	Amount of contribution (\$)		
05/25/2021	Lucious William self		1000.00		
Campaign Contribution	Contributor address; City; State; 1421 Covington DeSoto,	Zip Code TX 75115			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)		
Date	Full name of contributor	D#:)	Amount of contribution (\$)		
05/20/2021	Dallas Firefighters Dallas Firefighters Associate		2500.00		
Campaign Contribution	Contributor address; City; State; 10956 Audelia Dallas, T	Zip Code			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)		

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 9 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)
05/05/2021	Frank Mihalopoulos		1000.00
	6 Contributor address; City; State;	Zip Code	
Campaign Contribution	3932 Potomac Dallas, 7	ΓX 75205	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
05/06/2021	Dal Nam		1000.00
Campaign	Contributor address; City; State;	Zip Code	
Contribution	4404 Windsor Ridge Irving, T	ΓX 75038	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
05/04/2021	James Lee self		1000.00
Campaign Contribution	Contributor address; City; State; 616 Scenic Dr Irving, 7	Zip Code ΓX 75039	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#·)	Amount of contribution (\$)
05/14/2021	Stuart Crow self	, ,	1000.00
Campaign Contribution		Zip Code ΓX 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 10 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date	5 Full name of contributor out-of-state PAC (I	D#:)	7 Amount of contribution (\$)
05/14/2021	Robert Crow		1000.00
Campaign	6 Contributor address; City; State;	Zip Code	
Contribution	4612 Wataugua Dallas, T	TX 75209	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
05/10/2021	Katherine Crow self		1000.00
00, -0, -0	Contributor address; City; State;	Zip Code	1000.00
Campaign Contribution	4700 Preston Dallas, T	TX 75205	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
05/13/2021	Jane Valach self		500.00
Campaign	Contributor address; City; State;		
Contribution	5 Lazee Houston,	, TX 77024	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of contribution (\$)
05/03/2021	Gilbert Aranza self	·	1000.00
Campaign Contribution	-	Zip Code 'X 75360	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 11 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date	5 Full name of contributor ☐ out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)
04/29/2021	Roselinda Aranza self		1000.00
	6 Contributor address; City; State;	Zip Code	
Campaign Contribution	3445 University Dallas, T	TX 75205	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC (I	ID#:)	Amount of contribution (\$)
04/24/2021	Bishop Dwayne		1000.00
Campaign	Contributor address; City; State;	Zip Code	
Contribution	1035 Astaire Duncany	ville, TX 75138	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
04/24/2021	Deanna Hill self		1000.00
Campaign Contribution	Contributor address; City; State; P.O. Box 383162 Duncany	Zip Code ville, TX 75138	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
05/22/2021	ken smith self	·	196.00
Campaign Contribution	· · · · · · · · · · · · · · · · · · ·	Zip Code TX 75215	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 12 of 13				
2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
carolyn k arnold					
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)			
04/25/2021	Russell Wilson self	250.00			
	6 Contributor address; City; State; Zip Code				
Campaign Contribution	1910 Pacific Suite 15100 Dallas, TX 75201				
8 Principal occu	pation / Job title (See Instructions) 9 Employ	yer (See Instructions)			
Date	Full name of contributor	Amount of contribution (\$)			
05/22/2021	Clifton Miller self	250.00			
Campaign	Contributor address; City; State; Zip Cod				
Contribution	2600 Southlake Blvd Southlake, TX 760	092			
Principal occup	ation / Job title (See Instructions) Employ	yer (See Instructions)			
Date	Full name of contributor ut-of-state PAC (ID#:	Amount of contribution (\$)			
05/03/2021	Ronald Steinhardt self	300.00			
Campaign Contribution	Contributor address; City; State; Zip Code 25 Robledo Dr Dallas, TX 75230				
Principal occup	pation / Job title (See Instructions) Employ	yer (See Instructions)			
Date	Full name of contributor ut-of-state PAC (ID#:	Amount of contribution (\$)			
04/24/2021	Sergio Cazares self	200.00			
Campaign Contribution	Contributor address; City; State; Zip Code 2512 Expositioin Austin, TX 78703	e			
Principal occup	pation / Job title (See Instructions) Employ	yer (See Instructions)			

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 13 of 13
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
carolyn k arnold			
4 Date		D#:)	7 Amount of contribution (\$)
04/24/2021	Debbie Branson self		1000.00
Campaign	6 Contributor address; City; State;	Zip Code	
Contribution	6920 Turtle Creek Blvd Dallas, T	X 75205	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
04/25/2021	David Snell self		1000.00
	Contributor address; City; State;	Zip Code	1000.00
Campaign Contribution		ГХ 76226	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
04/26/2021	Kristian Teleki self		1000.00
Campaign	Contributor address; City; State;	Zip Code	
Contribution	235 Canyon Oaks Argyle, T	ГХ 76226	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
	Contributor address; City; State;	Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Candidate/Officeholder/Politica	al Committee Legal Services Salarie	es/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 F1:	2 FILER NAME carolyn k arnold	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
04/28/2021	Nethal Jackson NBJ&Associates	
6 Amount (\$) 3500.00	7 Payee address; City; State; Zip Code 2851 Toluca Dallas, TX 75224	
Campaign Funds for Campaign Expenditures		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense n/a
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name carolyn king arnold	Office sought Office held Council District 4
Date	Payee name	
05/25/2021	LaShun Virdin S&J Associates	
Amount (\$) 1100.00	Payee address; City; State; Zip Code 3425 Hacienda Dallas, TX 75233	9
Campaign Funds for Campaign Expenditures		
PURPOSE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Summed Augest Contract Europ	Check if Austin, TX, officeholder living expense
EXPENDITURE		n/a
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Carolyn King Arnold	Office sought Office held Council District 4
Date	Payee name	
05/26/2021	Reilly Reilly Echols	
Amount (\$) 2792.00	Payee address; City; State; Zip Code 1710 Harwood Dallas, TX 75215	
Campaign Funds for Campaign Expenditures	Trivina wood Banas, 17 75215	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Printing Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		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 Office held Council District 4 Dallas City Council
	ATTACH ADDITIONAL COPIES OF TH	IIS SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Candidate/Officeholder/Politica	al 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 F1: 2 of 4	2 FILER NAME carolyn k arnold	3 Filer ID (Ethics Commission Filers)		
4 Date	5 Payee name	<u> </u>		
05/26/2021	Jeff Ross The Order Desk			
6 Amount (\$) 1223.54	7 Payee address; City; State; Zip Code 9840 Monroe Dr Suite 1(24allas, TX 75220			
Campaign Funds for Campaign Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE		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 Office held Council District 4 Dallas City Council		
Date	Payee name			
05/12/2021	Freida Keglar Keglar&Associates			
Amount (\$) 1500.00	Payee address; City; State; Zip Code 1626 Mentor Dallas, TX 75216			
Campaign Funds for Campaign Expenditures				
PURPOSE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE		Check if Austin, TX, officeholder living expense		
LAI LIIDII GIIL		n/a		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Carolyn King Arnold	Office sought Office held Council District 4 Dallas City Council		
Date	Payee name			
05/15/2021	Crickett Crickett Wireless			
Amount (\$) 125.00	Payee address; City; State; Zip Code 3200 Lancaster Dallas, TX 75216			
Campaign Funds for Campaign Expenditures	Sandisci Sundis, 111 / 3210			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE		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 Office held Council District 4 Dallas City Council		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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)

Gredit Card Payment	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	5 Payee name	'		
05/23/2021	CCP Printing CCPPrinting			
6 Amount (\$) 150.00 Campaign Funds for	7 Payee address; City; State; Zip Code 5534 S. Hampton Dallas, TX 75232			
Campaign Expenditures	(a) Cotogony (Coe Cotogonica listed at the tag of this cohodule)	(h) Description		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense n/a		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Carolyn King Arnold	Office sought Office held Council District 4 Dallas City Council		
Date	Payee name			
05/05/2021	Josh Cogan Cogan			
Amount (\$) 1000.00	Payee address; City; State; Zip Code 2320 Canton Suite 1133 Dallas, TX 75201			
Campaign Funds for Campaign Expenditures				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. 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 Office held Council District 4 Dallas City Council		
Date	Payee name			
05/05/2021	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 Check if travel outside of Texas. Complete Schedule T. 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 Office held Council District 4 Dallas City Council		
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Candidate/Officeholder/Politica	al 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 F1: 4 of 4	2 FILER NAME carolyn k arnold	3 Filer ID (Ethics Commission Filers)		
4 Date	5 Payee name			
05/12/2021	General Dollar General Dollar			
6 Amount (\$) 110.00	7 Payee address; City; State; Zip Code 3936 Polk Street Dallas, TX 75232			
Campaign Funds for Campaign Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE		Check if Austin, TX, officeholder living expense n/a		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Carolyn King Arnold	Office sought Office held Council District 4 Dallas City Council		
Date	Payee name			
05/20/2021	Quik Trip Quik Trip			
Amount (\$) 110.00	Payee address; City; State; Zip Code 4767 S. RLThorton Dallas, TX 75232			
Campaign Funds for Campaign Expenditures				
PURPOSE OF	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
EXPENDITURE	2. Properties	n/a		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Carolyn King Arnold	Office sought Office held Council District 4 Dallas City Council		
Date	Payee name			
05/06/2021	Kat Nealy Nealy Group			
Amount (\$) 2500.00	Payee address; City; State; Zip Code P.O. Box 191803 Dallas, TX 75219			
Campaign Funds for Campaign Expenditures	1.0. Box 171003 Builds, 17 (321)			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Polling Expense	Check if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE		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 Office held Council District 4 Dallas City Council		
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