

**CORRECTION AFFIDAVIT  
FOR CANDIDATE/OFFICEHOLDER  
DAILY PRE-ELECTION REPORT**

**FORM COR-DAILY-C C/OH**

1 Filer ID (Ethics Commission Filers)		2 Total pages filed: <u>62</u>		<b>OFFICE USE ONLY</b>		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI			Date Received
	NICKNAME	LAST	SUFFIX			Date Hand-delivered or Date Postmarked
4 DATE ORIGINAL REPORT FILED		Month	Day	Year	Receipt #	
		<u>7 / 15 / 2020</u>			Amount \$	
5 EXPLANATION OF CORRECTION				Date Processed	Date Imaged	
<p>Three expenditures listed as "Political Expenditures from Political Contributions" should have been reported as "Political Expenditures made for Personal Funds". These expenses were incurred on my personal credit card dating from April 2020 to June 2020. Each is to Spone Spone and is an expense of \$28.15, totaling \$84.45. Changes to pg 52, 53, &amp; 62</p>						

RECEIVED  
 BOARD SERVICES  
 DALLAS ISD

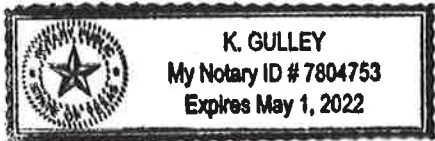
2021 SEP 28 PM 2:23

6 AFFIDAVIT

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

*Alex Enriquez*

Signature of Candidate or Officeholder



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by Alex Enriquez this the 28th day of September, 2021, to certify which, witness my hand and seal of office.

*K. Gulley*

Signature of officer administering oath

K. Gulley

Printed name of officer administering oath

*Notary*

Title of officer administering oath

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

## **CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER SPECIAL PRE-ELECTION REPORT**

**All Reports:** A filer who files a corrected report must submit a correction affidavit. The affidavit must identify the information that has changed.

**Reports filed with Texas Ethics Commission:** A corrected special pre-election report filed with the Ethics Commission after its due date is considered late for purposes of late-filing penalties. A filer wishing to ask the Ethics Commission to consider waiving or reducing a late-filing penalty may do so by providing a basis of the request in the correction affidavit.

Attach additional pages as necessary.

### **INSTRUCTIONS FOR COMPLETING THIS FORM**

*The following numbers correspond to the numbered boxes on the other side.*

**1. Filer ID.** You should have received from the Ethics Commission a letter acknowledging receipt of your campaign treasurer appointment and assigning you a Filer ID. Put that number in this box.

**2. Total Pages Filed.** After completing this form and any attachments, count the number of pages. Enter that number in this box. Each side of a two-sided form counts as a page. In other words, this form is two pages.

**3. Candidate/Officeholder Name.** Put your full name here. Enter your name in the same way as on the report you are correcting.

**4. Date Original Report Filed.** Enter the date the report you are correcting was filed. The year is important because filers sometimes correct reports years after filing the original.

**5. Explanation of Correction.** Attach any part of the campaign finance report form needed to report and explain corrections. Explain why there was an error on the original report. Also explain what information is being corrected and how the new information is different from the information on the original report. (Use additional pages if you need more space.) You may also use this area to request a waiver or reduction of a late-filing penalty and state the basis of your request.

**6. Affidavit.** Read the affidavit before signing. You must sign the affidavit in the presence of an individual authorized to take oaths. If signed before a notary public, the affidavit must include the notary's signature and seal.



**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

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

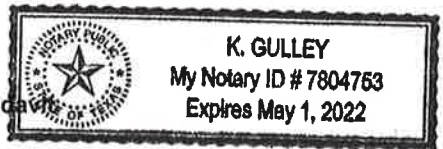
**15 C/OH NAME** Alex Enriquez **16 Filer ID (Ethics Commission Filers)**

<b>17 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b>	\$ <u>0.00</u>
	<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$ <u>\$32,683.08</u>
<b>EXPENDITURE TOTALS</b>	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.</b>	\$ <u>0.00</u>
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ <u>\$32,551.67</u>
<b>CONTRIBUTION BALANCE</b>	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD</b>	\$ <u>\$2007.20</u>
<b>OUTSTANDING LOAN TOTALS</b>	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ <u>0.00</u>

**18 SIGNATURE** 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.

Alex Enriquez  
Signature of Candidate or Officeholder

**Please complete either option below:**



(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Alex Enriquez this the 28th day of September, 2021 to certify which, witness my hand and seal of office.

K. Gully K. Gully Notary  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.

(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(month) (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

Alex ENRIQUET

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 32,683.08
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ —
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ —
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$ —
5.	<input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 30,675.80
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ —
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ —
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ —
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 1,875.87
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ —
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ —
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ —

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 04/14/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Alliance of Dallas Educators United Teachers PAC 6. Contributor address; City; State; ZIP Code 334 Centre St Dallas, TX 75208-6504	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 01/30/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Brad Adams 6. Contributor address; City; State; ZIP Code 6728 Winton St Dallas, TX 75214-2748	7. Amount of contribution (\$) \$516.45
8. Principal occupation / Job title (See Instructions) Healthcare Executive		9 Employer (See Instructions) Southwest Transplant Alliance
4. Date 02/20/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Brad Adams 6. Contributor address; City; State; ZIP Code 6728 Winton St Dallas, TX 75214-2748	7. Amount of contribution (\$) \$1,032.70
8. Principal occupation / Job title (See Instructions) Healthcare Executive		9 Employer (See Instructions) Southwest Transplant Alliance
4. Date 03/02/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Amy Anderson 6. Contributor address; City; State; ZIP Code 6846 Chantilly Ln Dallas, TX 75214-2718	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) stay at home mom		9 Employer (See Instructions) N/A
4. Date 01/21/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Ed Antal 6. Contributor address; City; State; ZIP Code 71 Cherry Ln Basking Ridge, NJ 07920-1109	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (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: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 06/27/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Edward Antal 6. Contributor address; City; State; ZIP Code 71 Cherry Ln Basking Ridge, NJ 07920-1109	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4. Date 07/01/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ James Applegate 6. Contributor address; City; State; ZIP Code 1409 S Lamar St Apt 953 Dallas, TX 75215-6855	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) City Year Dallas
4. Date 03/06/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Andrea Berman 6. Contributor address; City; State; ZIP Code 6922 Currin Dr Dallas, TX 75230-3526	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Self Employed
4. Date 01/21/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Tyler Bexley 6. Contributor address; City; State; ZIP Code 6016 Bryan Pkwy Dallas, TX 75206-8002	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Reese Marketos LLP
4. Date 02/21/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Robert Blumenstock 6. Contributor address; City; State; ZIP Code 4044 Sperry St Dallas, TX 75214-2740	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Self Employed

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 02/07/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lauren Bochner 6. Contributor address; City; State; ZIP Code 150 E 69th St Apt 3Q New York, NY 10021-5722	7. Amount of contribution (\$) \$37.37
8. Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) alice + olivia
4. Date 03/05/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Robyn Boren 6. Contributor address; City; State; ZIP Code 8701 Southwestern Blvd Dallas, TX 75206-2700	7. Amount of contribution (\$) \$26.01
8. Principal occupation / Job title (See Instructions) Marketing Manager		9 Employer (See Instructions) Dallas Regional Chamber
4. Date 06/26/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Brenda Bradford 6. Contributor address; City; State; ZIP Code 6211 W Northwest Hwy Apt 1101 Dallas, TX 75225-3424	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4. Date 01/27/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Julie Broberg 6. Contributor address; City; State; ZIP Code 6945 Tokalon Dr Dallas, TX 75214-3829	7. Amount of contribution (\$) \$516.45
8. Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) SBDM Chair, Woodrow Wilson High School
4. Date 03/04/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Julie Broberg 6. Contributor address; City; State; ZIP Code 6945 Tokalon Dr Dallas, TX 75214-3829	7. Amount of contribution (\$) \$258.32
8. Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) SBDM Chair, Woodrow Wilson High School

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 06/26/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Julie Broberg 6. Contributor address; City; State; ZIP Code 6945 Tokalon Dr Dallas, TX 75214-3829	7. Amount of contribution (\$) \$532.97
8. Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) SBDM Chair, Woodrow Wilson High School
4. Date 01/14/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Lindsey Bruning 6. Contributor address; City; State; ZIP Code 6501 Mccomas Blvd Dallas, TX 75214-3110	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Zelle LLP
4. Date 01/21/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Darryl Baudrige 6. Contributor address; City; State; ZIP Code 317 Derwyn Rd Lansdowne, PA 19050-1027	7. Amount of contribution (\$) \$26.01
8. Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) City Year
4. Date 01/28/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Kale Butcher 6. Contributor address; City; State; ZIP Code 5435 Richmond Ave Dallas, TX 75206-7149	7. Amount of contribution (\$) \$2,500.00
8. Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Riad Tile LLC
4. Date 01/20/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Brian Corrigan 6. Contributor address; City; State; ZIP Code 5912 9th St N Arlington, VA 22205-1402	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Greenleaf Health, Inc.

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 01/16/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Janis Cravens 6. Contributor address; City; State; ZIP Code 4241 Bordeaux Ave Dallas, TX 75205-3717	7. Amount of contribution (\$) \$516.45
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Self Employed
4. Date 04/30/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Micah Crissey 6. Contributor address; City; State; ZIP Code 101 S Brookside Dr Apt 2012 Dallas, TX 75214-4584	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Education- Head of School		9 Employer (See Instructions) Incarnation Academy
4. Date 02/20/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Amy Cuccia 6. Contributor address; City; State; ZIP Code 6442 Anita St Dallas, TX 75214-2704	7. Amount of contribution (\$) \$258.32
8. Principal occupation / Job title (See Instructions) Assistant Principal		9 Employer (See instructions) The Episcopal School of Dallas
4. Date 06/30/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Amy Cuccia 6. Contributor address; City; State; ZIP Code 6442 Anita St Dallas, TX 75214-2704	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Assistant Principal		9 Employer (See Instructions) The Episcopal School of Dallas
4. Date 01/15/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jenn Dawkins 6. Contributor address; City; State; ZIP Code 5315 Vickery Blvd Dallas, TX 75206-6228	7. Amount of contribution (\$) \$350.00
8. Principal occupation / Job title (See Instructions) PTA President		9 Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 01/21/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jenn Dawkins 6. Contributor address; City; State; ZIP Code 5315 Vickery Blvd Dallas, TX 75206-6228	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) PTA President		9 Employer (See Instructions)
4. Date 03/10/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jenn Dawkins 6. Contributor address; City; State; ZIP Code 5315 Vickery Blvd Dallas, TX 75206-6228	7. Amount of contribution (\$) \$350.00
8. Principal occupation / Job title (See Instructions) PTA President		9 Employer (See Instructions)
4. Date 02/19/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Gina Deitz 6. Contributor address; City; State; ZIP Code 6434 Kenwood Ave Dallas, TX 75214-3165	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Not Employed
4. Date 03/01/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ben DuBose 6. Contributor address; City; State; ZIP Code 3620 Vintage Pl Dallas, TX 75214-3270	7. Amount of contribution (\$) \$258.32
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) DuBose Law Firm
4. Date 03/06/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michael Dunagan 6. Contributor address; City; State; ZIP Code 3310 Fairmount St Apt 10A Dallas, TX 75201-1238	7. Amount of contribution (\$) \$258.32
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Jameson & Dunagan, P.C.

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 02/09/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Laura Duty 6. Contributor address; City; State; ZIP Code 6025 Bryan Pkwy Dallas, TX 75206-8001	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Nonprofit Consultant		9 Employer (See Instructions) Laura Duty & Associates, LLC
4. Date 07/11/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Laura Duty 6. Contributor address; City; State; ZIP Code 6025 Bryan Pkwy Dallas, TX 75206-8001	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Nonprofit Consultant		9 Employer (See Instructions) Laura Duty & Associates, LLC
4. Date 01/15/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Harryette Ehrhardt 6. Contributor address; City; State; ZIP Code 5731 Swiss Ave Dallas, TX 75214-4638	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
4. Date 02/04/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Shannon Enriquez 6. Contributor address; City; State; ZIP Code 9731 Tralee Dr Dallas, TX 75218-2839	7. Amount of contribution (\$) \$206.70
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Self
4. Date 03/05/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Shannon Enriquez 6. Contributor address; City; State; ZIP Code 9731 Tralee Dr Dallas, TX 75218-2839	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Self

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 06/26/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Shannon Enriquez 6. Contributor address; City; State; ZIP Code 9731 Tralee Dr Dallas, TX 75218-2839	7. Amount of contribution (\$) \$213.93
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Self
4. Date 02/26/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Carrie Fisketjon 6. Contributor address; City; State; ZIP Code 6347 Chesley Ln Dallas, TX 75214-2120	7. Amount of contribution (\$) \$258.32
8. Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Fisketjon
4. Date 07/10/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Carrie Fisketjon 6. Contributor address; City; State; ZIP Code 6347 Chesley Ln Dallas, TX 75214-2120	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Fisketjon
4. Date 06/22/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Andrew Fortin 6. Contributor address; City; State; ZIP Code 5116 Worth St Dallas, TX 75214-5350	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Senior Vice President		9 Employer (See Instructions) Associa
4. Date 01/28/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Elizabeth Furrh 6. Contributor address; City; State; ZIP Code 6342 Chesley Ln Dallas, TX 75214-2119	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Founder- Cooking for the Crowd-Charity Catering		9 Employer (See Instructions) Cooking for the Crowd

**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: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 02/20/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Elizabeth Furbh 6. Contributor address; City; State; ZIP Code 6342 Chesley Ln Dallas, TX 75214-2119	7. Amount of contribution (\$) \$258.32
8. Principal occupation / Job title (See Instructions) Founder- Cooking for the Crowd-Charity Catering		9 Employer (See Instructions) Cooking for the Crowd
4. Date 01/27/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Betty Gallagher 6. Contributor address; City; State; ZIP Code 5630 Gaston Ave Dallas, TX 75214-4682	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) DISD
4. Date 03/04/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Betty Gallagher 6. Contributor address; City; State; ZIP Code 5630 Gaston Ave Dallas, TX 75214-4682	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) DISD
4. Date 07/10/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Elizabeth Gallagher 6. Contributor address; City; State; ZIP Code 5630 Gaston Ave Dallas, TX 75214-4682	7. Amount of contribution (\$) \$26.01
8. Principal occupation / Job title (See Instructions) retired teacher		9 Employer (See Instructions) Self Employed
4. Date 02/20/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Robert Garrett 6. Contributor address; City; State; ZIP Code 3216 Jacotte Cir Dallas, TX 75214-3001	7. Amount of contribution (\$) \$258.32
8. Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) Greenlots

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 02/20/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Carrie Garst 6. Contributor address; City; State; ZIP Code 5024 Worth St Dallas, TX 75214-5345	7. Amount of contribution (\$) \$206.70
8. Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) The children's center
4. Date 02/13/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Rosemary Goodman 6. Contributor address; City; State; ZIP Code 8600 Thackery St Apt 2104 Dallas, TX 75225-3928	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Volunteer		9 Employer (See Instructions) Self
4. Date 03/17/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Aaron Gougis 6. Contributor address; City; State; ZIP Code 2906 E Kiest Blvd Apt K26 Dallas, TX 75216-2778	7. Amount of contribution (\$) \$26.01
8. Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) City Year
4. Date 03/09/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Holly Greef 6. Contributor address; City; State; ZIP Code 6665 Lakewood Blvd Dallas, TX 75214-3748	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4. Date 01/21/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Deborah Hack 6. Contributor address; City; State; ZIP Code 1078 Wimbleton Dr Birmingham, MI 48009-7605	7. Amount of contribution (\$) \$516.45
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 03/04/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Deborah Hack 6. Contributor address; City; State; ZIP Code 1078 Wimbleton Dr Birmingham, MI 48009-7605	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4. Date 03/04/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Deborah Hack 6. Contributor address; City; State; ZIP Code 1078 Wimbleton Dr Birmingham, MI 48009-7605	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4. Date 02/13/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Stephanie Haley 6. Contributor address; City; State; ZIP Code 7144 Aberdeen Ave Dallas, TX 75230-5407	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Volunteer		9 Employer (See Instructions) Self
4. Date 02/20/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Katherine Harmon 6. Contributor address; City; State; ZIP Code 6521 Ellsworth Ave Dallas, TX 75214-2725	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) NA
4. Date 03/21/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Amy And Ben Harms 6. Contributor address; City; State; ZIP Code 5918 Worth St Dallas, TX 75214-4499	7. Amount of contribution (\$) \$309.95
8. Principal occupation / Job title (See Instructions) Director of Brand Strategy		9 Employer (See Instructions) AT&T

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 06/26/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Wendy Hatchell 6. Contributor address; City; State; ZIP Code 6123 Lakeshore Dr Dallas, TX 75214-3609	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) McCarthy
4. Date 02/27/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Cindy Herb 6. Contributor address; City; State; ZIP Code 1516 Deer Creek Dr Desoto, TX 75115-3697	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4. Date 03/04/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Cindy Herb 6. Contributor address; City; State; ZIP Code 1516 Deer Creek Dr Desoto, TX 75115-3697	7. Amount of contribution (\$) \$53.89
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4. Date 02/10/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Thomas Hogue 6. Contributor address; City; State; ZIP Code 5924 Bryan Pkwy Dallas, TX 75206-8133	7. Amount of contribution (\$) \$60.00
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4. Date 06/26/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jessica Horn 6. Contributor address; City; State; ZIP Code 729 Ridgeway St Dallas, TX 75214-4454	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Banking		9 Employer (See Instructions) Veritex Bank

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 03/08/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Mandy Hovland 6. Contributor address; City; State; ZIP Code 16 Seaton Pl NW Washington, DC 20001-1034	7. Amount of contribution (\$)  \$103.45
8. Principal occupation / Job title (See Instructions) Momager		9 Employer (See Instructions) Unemployed
4. Date 02/20/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Brent Huebner 6. Contributor address; City; State; ZIP Code 6816 Sperry St Dallas, TX 75214-2852	7. Amount of contribution (\$)  \$100.00
8. Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Devenney Group Ltd.
4. Date 01/14/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ James Infanzon 6. Contributor address; City; State; ZIP Code 13 Townpark Ln Apt C Charleston, SC 29412-1513	7. Amount of contribution (\$)  \$51.83
8. Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) Student
4. Date 02/23/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Wilson Johnson 6. Contributor address; City; State; ZIP Code 3613 Vintage Pl Dallas, TX 75214-3269	7. Amount of contribution (\$)  \$516.45
8. Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Self Employed
4. Date 06/27/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Wilson Johnson 6. Contributor address; City; State; ZIP Code 3613 Vintage Pl Dallas, TX 75214-3269	7. Amount of contribution (\$)  \$51.83
8. Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Self Employed

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 02/26/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Margaret Karnowski 6. Contributor address; City; State; ZIP Code 5921 Worth St Dallas, TX 75214-4456	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Counselor		9 Employer (See Instructions) Richardson ISD
4. Date 01/26/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Greg Kimber 6. Contributor address; City; State; ZIP Code 5342 Miller Ave Dallas, TX 75206-6423	7. Amount of contribution (\$) \$26.01
8. Principal occupation / Job title (See Instructions) Bus driver		9 Employer (See Instructions) DISD
4. Date 02/07/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Dawn Kossmann 6. Contributor address; City; State; ZIP Code 6024 Bryan Pkwy Dallas, TX 75206-8002	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Administrative Assistant		9 Employer (See Instructions) City of University Park
4. Date 02/20/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Eric Kraft 6. Contributor address; City; State; ZIP Code 7039 Lakeshore Dr Dallas, TX 75214-3553	7. Amount of contribution (\$) \$516.45
8. Principal occupation / Job title (See Instructions) Banker		9 Employer (See Instructions) Comerica
4. Date 02/07/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Seth Kranz 6. Contributor address; City; State; ZIP Code 5829 Richmond Ave Dallas, TX 75206-6837	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) sales		9 Employer (See Instructions) Kronos

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 02/07/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Kathleen Lewis 6. Contributor address; City; State; ZIP Code 5595 E Arroyo Verde Dr Paradise Valley, AZ 85253-4252	7. Amount of contribution (\$) \$258.32
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4. Date 07/13/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Michael Lombardo 6. Contributor address; City; State; ZIP Code 548 Market St # PMB98100 San Francisco, CA 94104-5401	7. Amount of contribution (\$) \$206.70
8. Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) BookNook Inc
4. Date 02/20/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Chris Loper 6. Contributor address; City; State; ZIP Code 4324 Santa Barbara Dr Dallas, TX 75214-2841	7. Amount of contribution (\$) \$258.32
8. Principal occupation / Job title (See Instructions) self employed		9 Employer (See Instructions) self employed
4. Date 03/03/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jan Mallett 6. Contributor address; City; State; ZIP Code 7007 Northaven Rd Dallas, TX 75230-3504	7. Amount of contribution (\$) \$516.45
8. Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) SMU
4. Date 01/28/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Pete Marketos 6. Contributor address; City; State; ZIP Code 7189 Greentree Ln Dallas, TX 75214-1928	7. Amount of contribution (\$) \$5,000.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Reese Marketos LLP

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 01/24/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Gia Marshello 6. Contributor address; City; State; ZIP Code 6224 Oram St Unit 3 Dallas, TX 75214-3980	7. Amount of contribution (\$)  \$103.45
8. Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Self Employed
4. Date 07/12/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Carly Allison McCullar 6. Contributor address; City; State; ZIP Code 2414 Driftway Dr Dallas, TX 75228-5910	7. Amount of contribution (\$)  \$26.01
8. Principal occupation / Job title (See Instructions) Substitute Teacher for Dallas ISD		9 Employer (See Instructions) DISD
4. Date 01/29/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Casey McCullar 6. Contributor address; City; State; ZIP Code 1511 Flemming Dr Longmont, CO 80501-1010	7. Amount of contribution (\$)  \$51.83
8. Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Vaisala
4. Date 07/11/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Dawn McCullar 6. Contributor address; City; State; ZIP Code 2414 Driftway Dr Dallas, TX 75228-5910	7. Amount of contribution (\$)  \$51.83
8. Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) DISD
4. Date 07/11/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Terry McCullar 6. Contributor address; City; State; ZIP Code 2414 Driftway Dr Dallas, TX 75228-5910	7. Amount of contribution (\$)  \$26.01
8. Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) Mesquite Chamber of Commerce

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 02/20/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Tina Meazell 6. Contributor address; City; State; ZIP Code 6544 Lange Cir Dallas, TX 75214-2489	7. Amount of contribution (\$)  \$103.45
8. Principal occupation / Job title (See Instructions) Advertising		9 Employer (See Instructions) Self Employed
4. Date 03/08/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Elayna Mitchell 6. Contributor address; City; State; ZIP Code 5323 Tremont St Dallas, TX 75214-5045	7. Amount of contribution (\$)  \$51.83
8. Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Self Employed
4. Date 07/10/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Nick Nepveux 6. Contributor address; City; State; ZIP Code 718 Dumas St Dallas, TX 75214-4915	7. Amount of contribution (\$)  \$103.45
8. Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Glenn Partners
4. Date 07/10/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Kristin Newby 6. Contributor address; City; State; ZIP Code 7038 Fairdale Ave Dallas, TX 75227-5727	7. Amount of contribution (\$)  \$26.01
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) SSJM Law
4. Date 01/31/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Martha Norton 6. Contributor address; City; State; ZIP Code 7220 Tokalon Dr Dallas, TX 75214-3560	7. Amount of contribution (\$)  \$309.95
8. Principal occupation / Job title (See Instructions) Occupational Therapist		9 Employer (See Instructions) First Unitarian Church of Dallas

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 01/27/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Larry Offutt 6. Contributor address; City; State; ZIP Code 6038 Bryan Pkwy Dallas, TX 75206-8002	7. Amount of contribution (\$) \$258.32
8. Principal occupation / Job title (See Instructions) risk manager		9 Employer (See Instructions) self
4. Date 02/07/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Larry Offutt 6. Contributor address; City; State; ZIP Code 6038 Bryan Pkwy Dallas, TX 75206-8002	7. Amount of contribution (\$) \$258.32
8. Principal occupation / Job title (See Instructions) Risk Manager		9 Employer (See Instructions) Self
4. Date 03/12/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Larry Offutt 6. Contributor address; City; State; ZIP Code 6038 Bryan Pkwy Dallas, TX 75206-8002	7. Amount of contribution (\$) \$155.08
8. Principal occupation / Job title (See Instructions) risk manager		9 Employer (See Instructions) self
4. Date 06/27/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Larry Offutt 6. Contributor address; City; State; ZIP Code 6038 Bryan Pkwy Dallas, TX 75206-8002	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) risk manager		9 Employer (See Instructions) self
4. Date 07/10/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Larry Offutt 6. Contributor address; City; State; ZIP Code 6038 Bryan Pkwy Dallas, TX 75206-8002	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) risk manager		9 Employer (See Instructions) self

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 02/13/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Suzee Oliphint 6. Contributor address; City; State; ZIP Code 5754 Belmont Ave Dallas, TX 75206-6802	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
4. Date 07/10/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Lora Owens 6. Contributor address; City; State; ZIP Code 5600 Victor St Dallas, TX 75214-4733	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) Dallas ISD
4. Date 02/13/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Carla Percival-Young 6. Contributor address; City; State; ZIP Code 6335 W Northwest Hwy Apt 1217 Dallas, TX 75225-3548	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4. Date 02/13/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Margaret Phife 6. Contributor address; City; State; ZIP Code 6029 Oram St Dallas, TX 75206-7233	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
4. Date 01/21/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Neset Pirkul 6. Contributor address; City; State; ZIP Code 655 Kessler Reserve Ct Dallas, TX 75208-0100	7. Amount of contribution (\$) \$2,500.00
8. Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) Cedar Springs Capital

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 01/15/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Angelica Portillo 6. Contributor address; City; State; ZIP Code 6808 Skillman St Apt 1319 Dallas, TX 75231-5805	7. Amount of contribution (\$) \$20.85
8. Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Dallas Afterschool
4. Date 03/04/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Angelica Portillo 6. Contributor address; City; State; ZIP Code 6808 Skillman St Apt 1319 Dallas, TX 75231-5805	7. Amount of contribution (\$) \$20.85
8. Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Dallas Afterschool
4. Date 04/30/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Angelica Portillo 6. Contributor address; City; State; ZIP Code 6808 Skillman St Apt 1319 Dallas, TX 75231-5805	7. Amount of contribution (\$) \$26.01
8. Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Dallas Afterschool
4. Date 06/30/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Angelica Portillo 6. Contributor address; City; State; ZIP Code 6808 Skillman St Apt 1319 Dallas, TX 75231-5805	7. Amount of contribution (\$) \$31.18
8. Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Dallas Afterschool
4. Date 02/20/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Donna Rainey 6. Contributor address; City; State; ZIP Code 7182 W Circle Dr Dallas, TX 75214-1942	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Pff

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 02/12/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ David Rutenberg 6. Contributor address; City; State; ZIP Code 155 Lexington Ave New York, NY 10016-8154	7. Amount of contribution (\$) \$1,032.70
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) DOL
4. Date 06/27/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Mindy Satterwhite 6. Contributor address; City; State; ZIP Code 6960 Tokalon Dr Dallas, TX 75214-3828	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Self employed		9 Employer (See Instructions) Mindy Satterwhite
4. Date 01/25/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Lindsay Sims 6. Contributor address; City; State; ZIP Code 6005 Bryan Pkwy Dallas, TX 75206-8001	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Speech pathologist		9 Employer (See Instructions) Pate rehab
4. Date 02/25/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Lindsay Sims 6. Contributor address; City; State; ZIP Code 6005 Bryan Pkwy Dallas, TX 75206-8001	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Speech pathologist		9 Employer (See Instructions) Pate rehab
4. Date 01/22/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Patty Slutsky 6. Contributor address; City; State; ZIP Code 807 S 6th St Philadelphia, PA 19147-3001	7. Amount of contribution (\$) \$26.01
8. Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) Catchafire.org

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 02/12/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Laura Smith 6. Contributor address; City; State; ZIP Code 700 Baylor St Austin, TX 78703-4934	7. Amount of contribution (\$) \$155.08
8. Principal occupation / Job title (See Instructions) Retired attorney		9 Employer (See Instructions) Retired
4. Date 06/27/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Doug Stanglin 6. Contributor address; City; State; ZIP Code 1600 N Oak St Apt 1225 Arlington, VA 22209-2767	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Writer		9 Employer (See Instructions) Gannett
4. Date 02/29/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Susan Stich 6. Contributor address; City; State; ZIP Code 5211 Victor St Dallas, TX 75214-5446	7. Amount of contribution (\$) \$26.01
8. Principal occupation / Job title (See Instructions) Sales manager		9 Employer (See Instructions) Alaska Airlines
4. Date 02/05/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Chad Stockton 6. Contributor address; City; State; ZIP Code 6102 Gaston Ave Dallas, TX 75214-4326	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Creative Director/Writer/Founder		9 Employer (See Instructions) Caprock Creative
4. Date 02/07/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Christy Tabor 6. Contributor address; City; State; ZIP Code 5015 Victor St Dallas, TX 75214-5440	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) CalAtlantic Title Group

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 01/27/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Christina Trotter 6. Contributor address; City; State; ZIP Code 5108 Tremont St Dallas, TX 75214-5319	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self Employed
4. Date 02/20/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Bm Turner 6. Contributor address; City; State; ZIP Code 6312 Chesley Ln Dallas, TX 75214-2119	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
4. Date 03/09/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Dm Turner 6. Contributor address; City; State; ZIP Code 6312 Chesley Ln Dallas, TX 75214-2119	7. Amount of contribution (\$) \$200.00
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
4. Date 02/19/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Brien Walker 6. Contributor address; City; State; ZIP Code 6840 Southridge Dr Dallas, TX 75214-3161	7. Amount of contribution (\$) \$1,032.70
8. Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Energy Edge
4. Date 01/27/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Penny Welsh 6. Contributor address; City; State; ZIP Code 360 W 43rd St Apt N7B New York, NY 10036-6463	7. Amount of contribution (\$) \$26.01
8. Principal occupation / Job title (See Instructions) Business		9 Employer (See Instructions) LiveRamp

**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

<b>The Instruction Guide explains how to complete this form.</b>		1. Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 02/11/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ David Whitley 6. Contributor address; City; State; ZIP Code 718 Nesbitt Dr Dallas, TX 75214-4442	7. Amount of contribution (\$) \$258.32
8. Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Self Employed
4. Date 02/19/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Amy Wilk 6. Contributor address; City; State; ZIP Code 6363 Mercedes Ave Dallas, TX 75214-3007	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Social Worker		9 Employer (See Instructions) NA
4. Date 02/19/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Amy Wilk 6. Contributor address; City; State; ZIP Code 6363 Mercedes Ave Dallas, TX 75214-3007	7. Amount of contribution (\$) \$51.83
8. Principal occupation / Job title (See Instructions) Social Worker		9 Employer (See Instructions) NA
4. Date 02/19/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Chris Wilroy 6. Contributor address; City; State; ZIP Code 6921 Delrose Dr Dallas, TX 75214-3503	7. Amount of contribution (\$) \$1,548.95
8. Principal occupation / Job title (See Instructions) Hotel Executive		9 Employer (See Instructions) Hilton
4. Date 02/21/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Tamara Woodchek 6. Contributor address; City; State; ZIP Code 7040 Hillgreen Dr Dallas, TX 75214-1930	7. Amount of contribution (\$) \$103.45
8. Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Unemployed

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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: not available
2. FILER NAME Alex Enriquez		3. Filer ID (Ethics Commission Filers)
4. Date 02/10/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Lydia Wright 6. Contributor address; City; State; ZIP Code 5347 Miller Ave Dallas, TX 75206-6422	7. Amount of contribution (\$)  \$309.95
8. Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Lakewood Veterinary Center
4. Date 02/10/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Lydia Wright 6. Contributor address; City; State; ZIP Code 5347 Miller Ave Dallas, TX 75206-6422	7. Amount of contribution (\$)  \$200.00
8. Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Lakewood Veterinary Center
4. Date 06/29/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Lydia Wright 6. Contributor address; City; State; ZIP Code 5347 Miller Ave Dallas, TX 75206-6422	7. Amount of contribution (\$)  \$103.45
8. Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Lakewood Veterinary Center
4. Date 02/10/2020	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Stephan Zane 6. Contributor address; City; State; ZIP Code 6614 Sunnyland Ln Dallas, TX 75214-3125	7. Amount of contribution (\$)  \$20.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Andrews Kurth, LLP

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 03/10/2020	5 Payee name 2020 Friends of Lakewood Golf Tour	
6 Amount \$1,040.58	7 Payee address; City; State; Zip Code --- Dallas, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
4 Date 03/10/2020	5 Payee name 2nd Annual Friends of Lakewood Cornhole Tournament	
6 Amount \$1,000.00	7 Payee address; City; State; Zip Code --- Dallas, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
4 Date 02/19/2020	5 Payee name Advocate Publishing	
6 Amount \$1,369.00	7 Payee address; City; State; Zip Code 6301 Gaston Ave Ste 820 Dallas, TX 75214-6291	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 06/12/2020	5 Payee name Advocate Publishing	
6 Amount \$2,000.00	7 Payee address; City; State: Zip Code 6301 Gaston Ave Ste 820 Dallas, TX 75214-6291	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 02/14/2020	5 Payee name Avant Garden	
6 Amount \$211.09	7 Payee address; City; State: Zip Code 4254 A Oak Lawn Ave Dallas, TX 75219-2312	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Event
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 06/09/2020	5 Payee name Alexandra Brooks	
6 Amount \$300.00	7 Payee address; City; State: Zip Code --- Dallas, TX 75228	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 07/08/2020	5 Payee name Alexandra Brooks	
6 Amount \$600.00	7 Payee address; City; State; Zip Code --- Dallas, TX 75228	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
4 Date 06/30/2020	5 Payee name Buffer Publishing	
6 Amount \$75.00	7 Payee address; City; State; Zip Code 2443 Fillmore St # 380-7163 San Francisco, CA 94115-1814	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Social Media
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
4 Date 02/04/2020	5 Payee name Claire Cahoon	
6 Amount \$1,500.00	7 Payee address; City; State; Zip Code 1800 N Hall St Apt 515 Dallas, TX 75204-4170	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 02/18/2020	5 Payee name Claire Cahoon	
6 Amount \$93.00	7 Payee address; City; State; Zip Code 1800 N Hall St Apt 515 Dallas, TX 75204-4170	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Reimbursement for event supplies
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
4 Date 03/12/2020	5 Payee name Claire Cahoon	
6 Amount \$1,500.00	7 Payee address; City; State; Zip Code 1800 N Hall St Apt 515 Dallas, TX 75204-4170	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
4 Date 05/11/2020	5 Payee name Claire Cahoon	
6 Amount \$3,000.00	7 Payee address; City; State; Zip Code 1800 N Hall St Apt 515 Dallas, TX 75204-4170	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 06/05/2020	5 Payee name Claire Cahoon	
6 Amount \$1,500.00	7 Payee address; City; State; Zip Code 1800 N Hall St Apt 515 Dallas, TX 75204-4170	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 07/08/2020	5 Payee name Claire Cahoon	
6 Amount \$1,500.00	7 Payee address; City; State; Zip Code 1800 N Hall St Apt 515 Dallas, TX 75204-4170	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 03/10/2020	5 Payee name Call Time AI	
6 Amount \$175.00	7 Payee address; City; State; Zip Code 2627 E College Ave Visalia, CA 93292-3205	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description Fundraising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 04/13/2020	5 Payee name Call Time AI	
6 Amount \$175.00	7 Payee address; City; State; Zip Code 2627 E College Ave Visalia, CA 93292-3205	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description Fundraising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 05/11/2020	5 Payee name Call Time AI	
6 Amount \$175.00	7 Payee address; City; State; Zip Code 2627 E College Ave Visalia, CA 93292-3205	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description Fundraising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 06/10/2020	5 Payee name Call Time AI	
6 Amount \$175.00	7 Payee address; City; State; Zip Code 2627 E College Ave Visalia, CA 93292-3205	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description Fundraising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 07/13/2020	5 Payee name Call Time AI	
6 Amount \$175.00	7 Payee address; 2627 E College Ave Visalia, CA 93292-3205	City: State: Zip Code
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description Fundraising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 06/11/2020	5 Payee name Canva	
6 Amount \$12.95	7 Payee address; 2/2 Lacey Street Surry Hills, NSW 2-010	City: State: Zip Code
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Website
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 07/13/2020	5 Payee name Canva	
6 Amount \$12.95	7 Payee address; 2/2 Lacey Street Surry Hills, NSW 2-010	City: State: Zip Code
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Website
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 02/18/2020	5 Payee name City Newspapers	
6 Amount \$1,440.00	7 Payee address; City; State; Zip Code 750 N Saint Paul St Ste 2100 Dallas, TX 75201-3214	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 03/24/2020	5 Payee name City Newspapers	
6 Amount \$1,440.00	7 Payee address; City; State; Zip Code 750 N Saint Paul St Ste 2100 Dallas, TX 75201-3214	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 02/10/2020	5 Payee name Megan Doyle	
6 Amount \$172.50	7 Payee address; City; State; Zip Code --- Dallas, TX 75205	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 03/13/2020	5 Payee name Megan Doyle	
6 Amount \$540.00	7 Payee address; City; State; Zip Code --- Dallas, TX 75205	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 06/01/2020	5 Payee name Megan Doyle	
6 Amount \$187.50	7 Payee address; City; State; Zip Code --- Dallas, TX 75205	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 03/09/2020	5 Payee name EB 2020 Hillcrest High School	
6 Amount \$1,038.19	7 Payee address; City; State; Zip Code --- Dallas, TX 75230	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

**The Instruction Guide explains how to complete this form.**

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 02/24/2020	5 Payee name EB Dallas Mavs St Patricks Day Parade	
6 Amount \$338.15	7 Payee address; City: State: Zip Code --- Dallas, TX 75206	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 06/30/2020	5 Payee name Lily Ellis	
6 Amount \$100.00	7 Payee address; City: State: Zip Code --- Dallas, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Mailer art
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 03/19/2020	5 Payee name Facebook	
6 Amount \$25.00	7 Payee address; City: State: Zip Code 1 Hacker Way Menlo Park, CA 94025-1456	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 03/23/2020	5 Payee name Facebook	
6 Amount \$25.00	7 Payee address; City: State: Zip Code 1 Hacker Way Menlo Park, CA 94025-1456	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 03/23/2020	5 Payee name Facebook	
6 Amount \$25.00	7 Payee address; City: State: Zip Code 1 Hacker Way Menlo Park, CA 94025-1456	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 03/27/2020	5 Payee name Facebook	
6 Amount \$35.00	7 Payee address; City: State: Zip Code 1 Hacker Way Menlo Park, CA 94025-1456	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

**The Instruction Guide explains how to complete this form.**

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 04/06/2020	5 Payee name Facebook	
6 Amount \$50.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025-1456	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 04/17/2020	5 Payee name Facebook	
6 Amount \$47.90	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025-1456	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 05/01/2020	5 Payee name Facebook	
6 Amount \$75.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025-1456	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 05/18/2020	5 Payee name Facebook	
6 Amount \$4.77	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025-1456	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 05/18/2020	5 Payee name Facebook	
6 Amount \$75.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025-1456	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 05/29/2020	5 Payee name Facebook	
6 Amount \$75.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025-1456	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 06/15/2020	5 Payee name Facebook	
6 Amount \$75.00	7 Payee address; City; State: Zip Code 1 Hacker Way Menlo Park, CA 94025-1456	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 06/17/2020	5 Payee name Facebook	
6 Amount \$14.85	7 Payee address; City; State: Zip Code 1 Hacker Way Menlo Park, CA 94025-1456	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 07/01/2020	5 Payee name Facebook	
6 Amount \$75.00	7 Payee address; City; State: Zip Code 1 Hacker Way Menlo Park, CA 94025-1456	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 02/03/2020	5 Payee name Friends of Mata	
6 Amount \$500.00	7 Payee address; --- Dallas, TX 75223	City; State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 02/05/2020	5 Payee name Frost Bank	
6 Amount \$26.00	7 Payee address; 6312 La Vista Dr Dallas, TX 75214-4357	City; State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Check processing
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 04/02/2020	5 Payee name GoFundMe Maple Lawn	
6 Amount \$100.00	7 Payee address; --- Dallas, TX 75235	City; State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 07/02/2020	5 Payee name Google G Suite	
6 Amount \$115.14	7 Payee address; City: State: Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Email
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 03/23/2020	5 Payee name Greenville Avenue Pizza	
6 Amount \$66.29	7 Payee address; City: State: Zip Code 1923 Greenville Ave Dallas, TX 75206-7438	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Event
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 02/04/2020	5 Payee name Home Depot	
6 Amount \$56.90	7 Payee address; City: State: Zip Code 6000 Skillman St Dallas, TX 75231-7721	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Signage
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 03/02/2020	5 Payee name Home Depot	
6 Amount \$96.41	7 Payee address; 6000 Skillman St Dallas, TX 75231-7721	City; State: Zip Code
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Signage
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 03/02/2020	5 Payee name Kendall Creative	
6 Amount \$899.98	7 Payee address; 17120 Dallas Pkwy Dallas, TX 75248-1144	City; State: Zip Code
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Paraphernalia
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 04/30/2020	5 Payee name Kendall Creative	
6 Amount \$205.59	7 Payee address; 17120 Dallas Pkwy Dallas, TX 75248-1144	City; State: Zip Code
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Paraphernalia
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

**The Instruction Guide explains how to complete this form.**

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)	
4 Date 03/27/2020	5 Payee name Mavich Branding Group		
6 Amount \$260.83	7 Payee address;	City;	State: Zip Code
	525 Commerce St Southlake, TX 76092-9190		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Hand sanitizer
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 06/04/2020	5 Payee name Nathaniel Ogren		
6 Amount \$200.00	7 Payee address;	City;	State: Zip Code
	--- Dallas, TX 75211		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense		(b) Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 07/08/2020	5 Payee name Nathaniel Ogren		
6 Amount \$156.00	7 Payee address;	City;	State: Zip Code
	--- Dallas, TX 75211		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense		(b) Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 02/04/2020	5 Payee name Paragon Solution	
6 Amount \$190.15	7 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
4 Date 03/02/2020	5 Payee name Paragon Solution	
6 Amount \$496.38	7 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
4 Date 04/02/2020	5 Payee name Paragon Solution	
6 Amount \$146.36	7 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 05/04/2020	5 Payee name Paragon Solution	
6 Amount \$9.02	7 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
4 Date 06/02/2020	5 Payee name Paragon Solution	
6 Amount \$2.41	7 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
4 Date 07/02/2020	5 Payee name Paragon Solution	
6 Amount \$73.01	7 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 02/07/2020	5 Payee name Pre-Geneva Association	
6 Amount \$1,000.00	7 Payee address; City: State: Zip Code --- Dallas, TX 75206	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 01/27/2020	5 Payee name Signage Systems Dallas	
6 Amount \$389.70	7 Payee address; City: State: Zip Code 7900 Ferguson Rd Dallas, TX 75228-6354	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Signage
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 02/04/2020	5 Payee name Signage Systems Dallas	
6 Amount \$668.99	7 Payee address; City: State: Zip Code 7900 Ferguson Rd Dallas, TX 75228-6354	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Signage
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 02/27/2020	5 Payee name Signage Systems Dallas	
6 Amount \$506.61	7 Payee address; City; State; Zip Code 7900 Ferguson Rd Dallas, TX 75228-6354	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Signage
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
4 Date 03/25/2020	5 Payee name Signage Systems Dallas	
6 Amount \$558.57	7 Payee address; City; State; Zip Code 7900 Ferguson Rd Dallas, TX 75228-6354	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Signage
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
4 Date 04/14/2020	5 Payee name SquareSpace	
6 Amount \$28.15	7 Payee address; City; State; Zip Code 225 Varick St New York, NY 10014-4304	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Website
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 05/18/2020	5 Payee name SquareSpace	
6 Amount \$28.15	7 Payee address; City; State; Zip Code 225 Varick St New York, NY 10014-4304	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Website
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 06/15/2020	5 Payee name SquareSpace	
6 Amount \$28.15	7 Payee address; City; State; Zip Code 225 Varick St New York, NY 10014-4304	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Website
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 02/18/2020	5 Payee name Texas Democratic Party	
6 Amount \$1,000.00	7 Payee address; City; State; Zip Code 1106 Lavaca St Ste 100 Austin, TX 78701-2170	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) OTHER (enter a category not listed above)	(b) Description Field data
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 02/20/2020	5 Payee name Trophies Inc Dallas	
6 Amount \$25.87	7 Payee address; 4321 Live Oak St Dallas, TX 75204-6716	City; State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Name tag
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 01/27/2020	5 Payee name Truck Yard	
6 Amount \$377.16	7 Payee address; 5624 Sears St Dallas, TX 75206-7118	City; State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Event
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 04/02/2020	5 Payee name Woodrow Wilson Robotics	
6 Amount \$100.00	7 Payee address; --- Dallas, TX 75214	City; State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule G:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 05/11/2020	5 Payee name Canva	
6 Amount \$77.70 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2/2 Lacey Street Surry Hills, NSW 2-010	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Advertising
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 01/09/2020	5 Payee name City of Dallas	
6 Amount \$275.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1500 Marilla St Dallas, TX 75201-6318	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Park Rental for event
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule G:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 04/02/2020	5 Payee name Google G Suite	
6 Amount \$128.98 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Email
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 01/09/2020	5 Payee name Mavich Branding Group	
6 Amount \$162.35 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 525 Commerce St Southlake, TX 76092-9190	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Banner
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule G:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 01/22/2020	5 Payee name NGP Van Inc.	
6 Amount \$150.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Organizing software
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 02/01/2020	5 Payee name NGP Van Inc.	
6 Amount \$150.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Organizing software
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule G:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 03/01/2020	5 Payee name NGP Van Inc.	
6 Amount \$150.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Organizing software
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 04/01/2020	5 Payee name NGP Van Inc.	
6 Amount \$150.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Organizing software
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule G:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 05/01/2020	5 Payee name NGP Van Inc.	
6 Amount \$150.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Organizing Software
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 06/01/2020	5 Payee name NGP Van Inc.	
6 Amount \$150.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Organizing software
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule G:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 07/01/2020	5 Payee name NGP Van Inc.	
6 Amount \$150.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Organizing software
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 03/14/2020	5 Payee name SquareSpace	
6 Amount \$84.45 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 225 Varick St New York, NY 10014-4304	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Website
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule G:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)
4 Date 01/14/2020	5 Payee name Trophics Inc Dallas	
6 Amount \$12.94  <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 4321 Live Oak St Dallas, TX 75204-6716	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Campaign paraphernalia
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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

### 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.

<b>1</b> Total pages Schedule G:	<b>2</b> FILER NAME <i>Alex ENRIQUEZ</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>4.14.2020</i>	<b>5</b> Payee name <i>SquareSpace</i>	
<b>6</b> Amount (\$) <i>\$28.15</i> <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code <i>225 Varick St. New York, NY 10114</i>	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	<b>(b)</b> Description
	<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 <i>5-19-2020</i>	Payee name <i>SquareSpace</i>	
Amount (\$) <i>\$28.15</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>225 Varick St. New York, NY 10114</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	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 <i>6.15.2020</i>	Payee name <i>SquareSpace</i>	
Amount (\$) <i>\$28.15</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>225 Varick St. New York, NY 10114</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	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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