

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

| | | | | | | | |
|--|-------------------------------------|---|---|---|--|--|------------|
| The C/OH Instruction Guide explains how to complete this form. | | 1. Filer ID (Ethics Commission Filers) | 2. Total pages filed: 25 | | | | |
| 3 CANDIDATE/ OFFICEHOLDER NAME | MS/MRS/MR | FIRST | MI | OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Date Processed Date Imaged | | | |
| | | Alex | | | | | |
| | NICKNAME | LAST | SUFFIX | | | | |
| | | Enriquez | | | | | |
| 4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS /PO BOX: | APT/SUITE # | CITY | STATE: | ZIP CODE | | |
| | 5118 Worth St | | Dallas | TX | 75214 | | |
| 5 CANDIDATE/ OFFICEHOLDER PHONE | AREA CODE | PHONE NUMBER | EXTENSION | | | | |
| | | (214) 463-4882 | | | | | |
| 6 CAMPAIGN TREASURER NAME | MS/MRS/MR | FIRST | MI | | | | |
| | | Jennifer | | | | | |
| | NICKNAME | LAST | SUFFIX | | | | |
| | | Dawkins | | | | | |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE): | | APT/SUITE # | CITY | STATE: | ZIP CODE | |
| | 5315 Vickery Blvd | | | Dallas | TX | 75206 | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION | | | | |
| | | (214) 684-8218 | | | | | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 | | <input type="checkbox"/> 30th day before election | | <input type="checkbox"/> Runoff | <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) | |
| | <input type="checkbox"/> July 15 | | <input checked="" type="checkbox"/> 8th day before election | | <input type="checkbox"/> Exceeded Modified Reporting limit | <input type="checkbox"/> Final report (Attach- COH-FR) | |
| 10 PERIOD COVERED | Month | Day | Year | THROUGH | Month | Day | Year |
| | | | 09/25/2020 | | | | 10/24/2020 |
| 11 ELECTION | ELECTION DATE | | | ELECTION TYPE | | | |
| | Month | Day | Year | <input type="checkbox"/> Primary | <input type="checkbox"/> Runoff | <input type="checkbox"/> Other | |
| | | | 11/3/2020 | <input checked="" type="checkbox"/> General | <input type="checkbox"/> Special | | |
| 12 OFFICE | OFFICE HELD (if any) | | | 13 OFFICE SOUGHT (if known) | | | |
| | | | | Other Office: Dallas ISD Board | | | |
| GO TO PAGE 2 | | | | | | | |

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

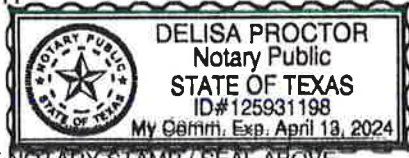
FORM C/OH
COVER SHEET PG 2

| | | |
|--------------|---------------|--|
| 14 C/OH NAME | Alex Enriquez | 15 Filer ID (Ethics Commission Filers) |
|--------------|---------------|--|

| | | |
|--|---|----------------|
| 16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages | THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. | |
| | COMMITTEE TYPE | COMMITTEE NAME |
| | <input type="checkbox"/> GENERAL | |
| | <input type="checkbox"/> SPECIFIC | |
| COMMITTEE ADDRESS | | |
| COMMITTEE CAMPAIGN TREASURER NAME | | |
| COMMITTEE CAMPAIGN TREASURER ADDRESS | | |

| | | | |
|-------------------------|---|---|------------|
| 17 CONTRIBUTION TOTALS | 1 | TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$0.00 |
| | 2 | TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$7,591.45 |
| EXPENDITURE TOTALS | 3 | TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$122.07 |
| | 4 | TOTAL POLITICAL EXPENDITURES | \$7,136.07 |
| CONTRIBUTION BALANCE | 5 | TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | \$3,750.00 |
| OUTSTANDING LOAN TOTALS | 6 | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$0.00 |

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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

Sworn to and subscribed before me, by the said Alex Enriquez, this the 26th day of October 2020 to certify which, witness my hand and seal of office.

Delisa Proctor
Signature of officer administering oath

DELISA PROCTOR
Printed name of officer administering oath

Notary
Title of officer administering oath

SUBTOTALS - COH**FORM C/OH
COVER SHEET PG 3**

| | |
|---|---|
| 19. FILER NAME Alex Enriquez | 20. FILER ID (Ethics Commission Filers) |
| 21. SCHEDULE SUBTOTALS NAME OF SCHEDULE | SUBTOTALS AMOUNT |
| 1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$7,591.45 |
| 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$0.00 |
| 3. SCHEDULE B: PLEDGED CONTRIBUTIONS | \$0.00 |
| 4. SCHEDULE E: LOANS | \$0.00 |
| 5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$6,973.69 |
| 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$0.00 |
| 7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | \$0.00 |
| 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$0.00 |
| 9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | \$162.38 |
| 10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$0.00 |
| 11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$0.00 |
| 12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS RETURNED TO FILER | \$0.00 |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1. Total pages Schedule A1: not available |
| 2. FILER NAME Alex Enriquez | | 3. Filer ID (Ethics Commission Filers) |
| 4. Date 10/17/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Kirsten Afklinteberg 6. Contributor address; City; State; ZIP Code 1087 Washington St Gloucester, MA 01930-1134 | 7. Amount of contribution (\$) \$33.33 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/12/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Alexandra Allen 6. Contributor address; City; State; ZIP Code 2 A Brentwood Rd Exeter, NH 03833-1544 | 7. Amount of contribution (\$) \$100.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Alexandra Allen 6. Contributor address; City; State; ZIP Code 2 A Brentwood Rd Exeter, NH 03833-1544 | 7. Amount of contribution (\$) \$100.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/14/2020 | 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 (\$) \$26.01 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Brendan Bailes 6. Contributor address; City; State; ZIP Code 810 A St SE Washington, DC 20003-1340 | 7. Amount of contribution (\$) \$50.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1. Total pages Schedule A1: not available |
| 2. FILER NAME Alex Enriquez | | 3. Filer ID (Ethics Commission Filers) |
| 4. Date 10/20/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Louise Bexley 6. Contributor address; City; State; ZIP Code 6016 Bryan Pkwy Dallas, TX 75206-8002 | 7. Amount of contribution (\$) \$51.83 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Kim Blumberg 6. Contributor address; City; State; ZIP Code 10641 W El Rancho Dr Sun City, AZ 85351-3835 | 7. Amount of contribution (\$) \$5.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Frank Campagna 6. Contributor address; City; State; ZIP Code 23 Cloverdale Rd Newton Centre, MA 02459-2430 | 7. Amount of contribution (\$) \$50.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/20/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Gurinder Cheema 6. Contributor address; City; State; ZIP Code 321 N 101st St Seattle, WA 98133-9113 | 7. Amount of contribution (\$) \$26.01 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/13/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Audra Clark 6. Contributor address; City; State; ZIP Code 6417 W 100th St Overland Park, KS 66212-1612 | 7. Amount of contribution (\$) \$51.83 |
| 8. Principal occupation / Job title (See Instructions) | | 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 10/05/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Kingsley And Beverly Cotton 6. Contributor address; City; State; ZIP Code 33640 Hillcrest Dr Farmington, MI 48335-3526 | 7. Amount of contribution (\$) \$103.45 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Kingsley And Beverly Cotton 6. Contributor address; City; State; ZIP Code 33640 Hillcrest Dr Farmington, MI 48335-3526 | 7. Amount of contribution (\$) \$51.83 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/01/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Olivia Covey 6. Contributor address; City; State; ZIP Code 6147 La Vista Dr Dallas, TX 75214-4310 | 7. Amount of contribution (\$) \$516.45 |
| 8. Principal occupation / Job title (See Instructions) Speech Pathologist | | 9 Employer (See Instructions) Methodist Health System |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Julie Davis 6. Contributor address; City; State; ZIP Code 6508 E 84th St Tulsa, OK 74133-4224 | 7. Amount of contribution (\$) \$60.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/03/2020 | 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) | | 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 10/14/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jennifer Eplett Reilly 6. Contributor address; City; State; ZIP Code 2987 Reymond Ave Baton Rouge, LA 70808-1576 | 7. Amount of contribution (\$) \$500.00 |
| 8. Principal occupation / Job title (See Instructions) Trustee and Co-founder | | 9 Employer (See Instructions) City Year, Inc |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Samuel Filler 6. Contributor address; City; State; ZIP Code 135 W 96th St Apt 11C New York, NY 10025-6437 | 7. Amount of contribution (\$) \$20.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/12/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Laura Freeland 6. Contributor address; City; State; ZIP Code 6009 Bryan Pkwy Dallas, TX 75206-8001 | 7. Amount of contribution (\$) \$51.83 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 09/25/2020 | 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 (\$) \$258.32 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 09/30/2020 | 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) | | 9 Employer (See Instructions) |

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| 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 10/20/2020 | 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) | | 9 Employer (See Instructions) |
| 4. Date 10/20/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Wayne Garcia 6. Contributor address; City; State; ZIP Code 5410 Goodwin Ave Dallas, TX 75206-6211 | 7. Amount of contribution (\$) \$100.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/16/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Cristina Gomez 6. Contributor address; City; State; ZIP Code 6810 Cruz St Apt B Austin, TX 78741-3524 | 7. Amount of contribution (\$) \$100.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Deborah Hack 6. Contributor address; City; State; ZIP Code 582 Pierce St Birmingham, MI 48009-1752 | 7. Amount of contribution (\$) \$51.83 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/13/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Meredith Hansen 6. Contributor address; City; State; ZIP Code 509 Linden St Glen Ellyn, IL 60137-4021 | 7. Amount of contribution (\$) \$100.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| 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 10/22/2020 | 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 (\$) \$206.70 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jeffrey Hawkinson 6. Contributor address; City; State; ZIP Code 8901 N 18th Ave Phoenix, AZ 85021-4323 | 7. Amount of contribution (\$) \$83.33 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/14/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Matt Hendren 6. Contributor address; City; State; ZIP Code 2113 Falcon Hill Dr Austin, TX 78745-3521 | 7. Amount of contribution (\$) \$50.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/13/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ John Herrmann 6. Contributor address; City; State; ZIP Code 697 Bergen St Apt 2 Brooklyn, NY 11238-6737 | 7. Amount of contribution (\$) \$83.33 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 09/30/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Devin Hibbard 6. Contributor address; City; State; ZIP Code 491 College St Boulder, CO 80302-8713 | 7. Amount of contribution (\$) \$51.83 |
| 8. Principal occupation / Job title (See Instructions) | | 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 10/06/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Carey Hurst 6. Contributor address; City; State; ZIP Code 5417 Swiss Ave Dallas, TX 75214-4946 | 7. Amount of contribution (\$) \$103.45 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 09/25/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Julie Ihrig 6. Contributor address; City; State; ZIP Code 5325 Vickery Blvd Dallas, TX 75206-6228 | 7. Amount of contribution (\$) \$51.83 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/14/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Cora Inez Outlaw 6. Contributor address; City; State; ZIP Code 11284 Brookhaven Ave Los Angeles, CA 90064-3915 | 7. Amount of contribution (\$) \$20.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/20/2020 | 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 (\$) \$26.01 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/19/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Alan Khazei 6. Contributor address; City; State; ZIP Code 48 Allerton St Brookline, MA 02445-7726 | 7. Amount of contribution (\$) \$46.22 |
| 8. Principal occupation / Job title (See Instructions) | | 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 10/11/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Joshua Killian 6. Contributor address; City; State; ZIP Code 6003 Bryan Pkwy Dallas, TX 75206-8001 | 7. Amount of contribution (\$) \$103.45 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/14/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Max Klau 6. Contributor address; City; State; ZIP Code 13 Shady Oak Ln Natick, MA 01760-3028 | 7. Amount of contribution (\$) \$8.33 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Max Klau 6. Contributor address; City; State; ZIP Code 13 Shady Oak Ln Natick, MA 01760-3028 | 7. Amount of contribution (\$) \$8.33 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/13/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jeremy Kress 6. Contributor address; City; State; ZIP Code 2265 Highland Dr Ann Arbor, MI 48105-1087 | 7. Amount of contribution (\$) \$40.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jeremy Kress 6. Contributor address; City; State; ZIP Code 2265 Highland Dr Ann Arbor, MI 48105-1087 | 7. Amount of contribution (\$) \$100.00 |
| 8. Principal occupation / Job title (See Instructions) | | 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 10/23/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jada Lewis 6. Contributor address; City; State; ZIP Code PO Box 654 Baton Rouge, LA 70821-0654 | 7. Amount of contribution (\$) \$103.45 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/05/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Eva Lloyd 6. Contributor address; City; State; ZIP Code 7302 Dominique Dr Dallas, TX 75214-2810 | 7. Amount of contribution (\$) \$200.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/16/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Sammy Mandell 6. Contributor address; City; State; ZIP Code 8646 Daytonia Ave Dallas, TX 75218-4106 | 7. Amount of contribution (\$) \$516.45 |
| 8. Principal occupation / Job title (See Instructions) Self Employed | | 9 Employer (See Instructions) Self Employed |
| 4. Date 10/14/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Seth Marbin 6. Contributor address; City; State; ZIP Code 1229 Pearl St Alameda, CA 94501-5317 | 7. Amount of contribution (\$) \$100.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Seth Marbin 6. Contributor address; City; State; ZIP Code 1229 Pearl St Alameda, CA 94501-5317 | 7. Amount of contribution (\$) \$100.00 |
| 8. Principal occupation / Job title (See Instructions) | | 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 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Sean McDevitt McDevitt 6. Contributor address; City; State; ZIP Code 43 Terrace Pl Tuckahoe, NY 10707-4146 | 7. Amount of contribution (\$) \$20.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/02/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Sean McGlynn 6. Contributor address; City; State; ZIP Code 4713 Wyaconda Rd Rockville, MD 20852-2439 | 7. Amount of contribution (\$) \$309.95 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 09/30/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jordan Michel 6. Contributor address; City; State; ZIP Code 5917 Reiger Ave Dallas, TX 75214-4724 | 7. Amount of contribution (\$) \$26.01 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/14/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jordan Michel 6. Contributor address; City; State; ZIP Code 5917 Reiger Ave Dallas, TX 75214-4724 | 7. Amount of contribution (\$) \$51.83 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/20/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Pia Micoli 6. Contributor address; City; State; ZIP Code 254 Park Pl Apt 3C Brooklyn, NY 11238-4357 | 7. Amount of contribution (\$) \$103.45 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| 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 10/14/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Danielle Mooney 6. Contributor address; City; State; ZIP Code 1029 High St Bridgewater, MA 02324-1917 | 7. Amount of contribution (\$) \$20.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Marc Morgan 6. Contributor address; City; State; ZIP Code 4238 S Pitkin St Aurora, CO 80013-3214 | 7. Amount of contribution (\$) \$20.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Joshua Murphy 6. Contributor address; City; State; ZIP Code 123 Linden Blvd Apt 12C Brooklyn, NY 11226-9708 | 7. Amount of contribution (\$) \$20.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/16/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Julia Newman 6. Contributor address; City; State; ZIP Code 6822 Vivian Ave Dallas, TX 75223-1148 | 7. Amount of contribution (\$) \$51.83 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/14/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Pawn Nitichan 6. Contributor address; City; State; ZIP Code 12 Hamilton St Dover, NH 03820-3915 | 7. Amount of contribution (\$) \$40.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| 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 10/14/2020 | 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 (\$) \$51.83 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/05/2020 | 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 (\$) \$51.83 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Greg Payne 6. Contributor address; City; State; ZIP Code 20791 Quiet Brook Pl Sterling, VA 20165-5865 | 7. Amount of contribution (\$) \$21.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 09/25/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Erin Peavey 6. Contributor address; City; State; ZIP Code 5519 Richard Ave Dallas, TX 75206-6715 | 7. Amount of contribution (\$) \$51.83 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/16/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Diane Podhrasky 6. Contributor address; City; State; ZIP Code 5322 Vickery Blvd Dallas, TX 75206-6229 | 7. Amount of contribution (\$) \$103.45 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| 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 10/14/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Greg Propper 6. Contributor address; City; State; ZIP Code 6380 Wilshire Blvd Fl 14 Los Angeles, CA 90048-5003 | 7. Amount of contribution (\$) \$100.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/19/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Ella Rawls 6. Contributor address; City; State; ZIP Code 17673 S Vermillion Sunset Dr Vail, AZ 85641-2734 | 7. Amount of contribution (\$) \$20.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 09/25/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Luke Rice 6. Contributor address; City; State; ZIP Code 5407 Richard Ave Dallas, TX 75206-6713 | 7. Amount of contribution (\$) \$103.45 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 09/25/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Mary Alice Riemer 6. Contributor address; City; State; ZIP Code 723 Parkmont St Dallas, TX 75214-4925 | 7. Amount of contribution (\$) \$103.45 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/13/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Charlie Rose 6. Contributor address; City; State; ZIP Code 113 Poplar St Roslindale, MA 02131-3636 | 7. Amount of contribution (\$) \$100.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| 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 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Charlie Rose 6. Contributor address; City; State; ZIP Code 113 Poplar St Roslindale, MA 02131-3636 | 7. Amount of contribution (\$) \$103.45 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 09/25/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jennifer Saucedo 6. Contributor address; City; State; ZIP Code 6578 Kingsbury Dr Dallas, TX 75231-8158 | 7. Amount of contribution (\$) \$51.83 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/14/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Stacy Schusterman 6. Contributor address; City; State; ZIP Code 110 W 7th St Tulsa, OK 74119-1031 | 7. Amount of contribution (\$) \$333.33 |
| 8. Principal occupation / Job title (See Instructions) Chair | | 9 Employer (See Instructions) CLSFF |
| 4. Date 10/16/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Stacy Schusterman 6. Contributor address; City; State; ZIP Code 110 W 7th St Tulsa, OK 74119-1031 | 7. Amount of contribution (\$) \$666.67 |
| 8. Principal occupation / Job title (See Instructions) Chair | | 9 Employer (See Instructions) CLSFF |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Karen Shatin 6. Contributor address; City; State; ZIP Code 2900 Main Line Blvd Apt 248 Alexandria, VA 22301-2905 | 7. Amount of contribution (\$) \$20.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| 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 10/14/2020 | 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) | | 9 Employer (See Instructions) |
| 4. Date 10/14/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Elizabeth Slater 6. Contributor address; City; State; ZIP Code 5565 N Linda Rd Tucson, AZ 85704-2639 | 7. Amount of contribution (\$) \$20.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Stefanie Vestal 6. Contributor address; City; State; ZIP Code 2300 Washington Pl NE Apt 409 Washington, DC 20018-1060 | 7. Amount of contribution (\$) \$16.67 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Kristin Walega 6. Contributor address; City; State; ZIP Code 45 Sutton Sq SW Unit 1104 Washington, DC 20024-3487 | 7. Amount of contribution (\$) \$100.00 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/15/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Heather Weaver 6. Contributor address; City; State; ZIP Code 510 Valencia St Dallas, TX 75223-1321 | 7. Amount of contribution (\$) \$51.83 |
| 8. Principal occupation / Job title (See Instructions) | | 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 10/08/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Tom Wilkie 6. Contributor address; City; State; ZIP Code 3834 Peter Pan Dr Dallas, TX 75229-3908 | 7. Amount of contribution (\$) \$103.45 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| 4. Date 10/16/2020 | 5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Tim Zimmermann 6. Contributor address; City; State; ZIP Code 2946 University Ter NW Washington, DC 20016-3461 | 7. Amount of contribution (\$) \$33.33 |
| 8. Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |

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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/Deverage 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 09/29/2020 | 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 | |
| PURPOSE OF EXPENDITURE | 8 (a) Category (See categories listed at the top of this schedule) Advertising Expense | |
| | (b) Description | |
| <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| 4 Date 10/15/2020 | 5 Payee name Advocate Publishing | |
| 6 Amount \$1,000.00 | 7 Payee address; City: State: Zip Code 6301 Gaston Ave Ste 820 Dallas, TX 75214-6291 | |
| PURPOSE OF EXPENDITURE | 8 (a) Category (See categories listed at the top of this schedule) Advertising Expense | |
| | (b) Description | |
| <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| 4 Date 10/19/2020 | 5 Payee name Advocate Publishing | |
| 6 Amount \$1,729.00 | 7 Payee address; City: State: Zip Code 6301 Gaston Ave Ste 820 Dallas, TX 75214-6291 | |
| PURPOSE OF EXPENDITURE | 8 (a) Category (See categories listed at the top of this schedule) Advertising Expense | |
| | (b) Description | |
| <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| 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 10/01/2020 | 5 Payee name Facebook | |
| 6 Amount \$75.00 | 7 Payee address; City; State: Zip Code 1 Hacker Way Menlo Park, CA 94025-1456 | |
| PURPOSE OF EXPENDITURE | 8 (a) Category (See categories listed at the top of this schedule) (b) Description Advertising Expense | |
| | <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 10/13/2020 | 5 Payee name Facebook | |
| 6 Amount \$75.00 | 7 Payee address; City; State: Zip Code 1 Hacker Way Menlo Park, CA 94025-1456 | |
| PURPOSE OF EXPENDITURE | 8 (a) Category (See categories listed at the top of this schedule) (b) Description Advertising Expense | |
| | <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 10/15/2020 | 5 Payee name Facebook | |
| 6 Amount \$75.00 | 7 Payee address; City; State: Zip Code 1 Hacker Way Menlo Park, CA 94025-1456 | |
| PURPOSE OF EXPENDITURE | 8 (a) Category (See categories listed at the top of this schedule) (b) Description Advertising Expense | |
| | <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 10/19/2020 | 5 Payee name Facebook | |
| 6 Amount \$22.62 | 7 Payee address; City; 1 Hacker Way Menlo Park, CA 94025-1456 | State: Zip Code |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule) Advertising Expense | (b) Description |
| | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| 4 Date 10/19/2020 | 5 Payee name Facebook | |
| 6 Amount \$125.00 | 7 Payee address; City; 1 Hacker Way Menlo Park, CA 94025-1456 | State: Zip Code |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule) Advertising Expense | (b) Description |
| | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| 4 Date 10/19/2020 | 5 Payee name Facebook | |
| 6 Amount \$175.00 | 7 Payee address; City; 1 Hacker Way Menlo Park, CA 94025-1456 | State: Zip Code |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule) Advertising Expense | (b) Description |
| | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 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 10/21/2020 | 5 Payee name Facebook | |
| 6 Amount \$250.00 | 7 Payee address; City; State: Zip Code 1 Hacker Way Menlo Park, CA 94025-1456 | |
| PURPOSE OF EXPENDITURE | 8 (a) Category (See categories listed at the top of this schedule) Advertising Expense | |
| | (b) Description | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | <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 10/23/2020 | 5 Payee name Facebook | |
| 6 Amount \$400.00 | 7 Payee address; City; State: Zip Code 1 Hacker Way Menlo Park, CA 94025-1456 | |
| PURPOSE OF EXPENDITURE | 8 (a) Category (See categories listed at the top of this schedule) Advertising Expense | |
| | (b) Description | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | <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 10/20/2020 | 5 Payee name Edison McGarry | |
| 6 Amount \$700.00 | 7 Payee address; City; State: Zip Code ----- Cary, NC 27513 | |
| PURPOSE OF EXPENDITURE | 8 (a) Category (See categories listed at the top of this schedule) Consulting Expense | |
| | (b) Description | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | <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/Deverage 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 10/02/2020 | 5 Payee name Paragon Solution | |
| 6 Amount \$225.00 | 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 |
| | <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 10/01/2020 | 5 Payee name NGP Van Inc. | |
| 6 Amount \$162.38 <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 |
| | (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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