

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: 59 | | | | |
| 3 CANDIDATE/ OFFICEHOLDER NAME | MS/MRS/MR | FIRST | MI | OFFICE USE ONLY Date Received 2020 JUL 15 PM 3:40 Date Hand-delivered or Date Postmarked Receipt # Amount \$ 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 | | Date Processed | | |
| | | Jennifer M. | | | Date Imaged | | |
| | 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 checked="" type="checkbox"/> July 15 <input 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 |
| | | | 01/01/2020 | | | | 07/15/2020 |
| 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 Distr | | | |
| 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)
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.

| | |
|---|---|
| <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE TYPE: _____ COMMITTEE NAME: _____ COMMITTEE ADDRESS: _____ COMMITTEE CAMPAIGN TREASURER NAME: _____ COMMITTEE CAMPAIGN TREASURER ADDRESS: _____ |
|---|---|

additional pages

| | | |
|-------------------------|---|-------------|
| 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) | \$32,683.08 |
| EXPENDITURE TOTALS | 3 TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$0.00 |
| | 4 TOTAL POLITICAL EXPENDITURES | \$32,551.67 |
| CONTRIBUTION BALANCE | 5 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | \$1,922.83 |
| OUTSTANDING LOAN TOTALS | 6 TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$0.00 |

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Alexander Enriquez
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Alexander Enriquez, this the 15 day of July, 2020 to certify which, witness my hand and seal of office.

Nicholas Nied
Signature of officer administering oath Printed name of officer administering oath

Notary Public
Title of officer administering oath

NICHOLAS NIED
Notary Public, State of Michigan
County of Washtenaw
My Commission Expires 07-25-2024
Acting in the County of Cadiz

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 | \$32,683.08 |
| 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 | \$30,760.25 |
| 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 | \$1,791.42 |
| 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 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 Mccommas 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 Bundrige 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

| | | |
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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 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

| | | |
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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 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 _____ Carric 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

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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 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

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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 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

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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 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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| 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 02/26/2020 | 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

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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 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

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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 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

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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 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

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| 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

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| 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

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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 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) Fff |

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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 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

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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 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 |

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 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 _____ Brian 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 |

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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 02/11/2020 | 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; --- Dallas, TX 75214 | 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 03/10/2020 | 5 Payee name 2nd Annual Friends of Lakewood Cornhole Tournament | |
| 6 Amount \$1,000.00 | 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) 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; 6301 Gaston Ave Ste 820 Dallas, TX 75214-6291 | City; State: Zip Code |
| 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 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 02/14/2020 | 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 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 06/09/2020 | 5 Payee name Alexandra Brooks | |
| 6 Amount \$300.00 | 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 |

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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 | |
| 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 | |
| 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 | |
| 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; 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 06/11/2020 | 5 Payee name Canva | |
| 6 Amount \$12.95 | 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) 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; 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) 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 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 05/18/2020 | 5 Payee name Facebook | |
| 6 Amount \$75.00 | 7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025-1456 | |
| 8 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 05/29/2020 | 5 Payee name Facebook | |
| 6 Amount \$75.00 | 7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025-1456 | |
| 8 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 06/15/2020 | 5 Payee name Facebook | |
| 6 Amount \$75.00 | 7 Payee address; City; State: Zip Code 1 Hacker Way Menlo Park, CA 94025-1456 | |
| 8 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 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 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 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 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 02/03/2020 | 5 Payee name Friends of Mata | |
| 6 Amount \$500.00 | 7 Payee address; City; State; Zip Code --- Dallas, TX 75223 | |
| 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; City; State; Zip Code 6312 La Vista Dr Dallas, TX 75214-4357 | |
| 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; City; State; Zip Code --- Dallas, TX 75235 | |
| 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; 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 |
| 4 Date 03/02/2020 | 5 Payee name Kendall Creative | |
| 6 Amount \$899.98 | 7 Payee address; City: State: Zip Code 17120 Dallas Pkwy Dallas, TX 75248-1144 | |
| 8 PURPOSE OF EXPENDITURE | (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; City: State: Zip Code 17120 Dallas Pkwy Dallas, TX 75248-1144 | |
| 8 PURPOSE OF EXPENDITURE | (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 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 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 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 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 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 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 |

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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 02/27/2020 | 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; 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 Nametag |
| | <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; City; State; Zip Code 5624 Sears St Dallas, TX 75206-7118 | |
| 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; City; State; Zip Code --- Dallas, TX 75214 | |
| 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.

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|--|--|--|-------------|
| 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 |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By 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 Trophies 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 |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED