CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how t	o complete this form.	1. Filer ID (Ethics Commission	n Filers)	2. Total pages	s filed:
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR	FIRST Alex LAST Enriquez		SUFFIX	OFFICE (JE DA
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS /PO BOX: 5118 Worth St.	APT/SUITE # CITY Dallas		ZIP CODE	Date Hand-delivered	or Date Postmer 40
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PH (214) 463-	ONE NUMBER 4882	EXTENSION		Receipt #	Amount \$
6 CAMPAIGN TREASURER NAME	MS/MRS/MR NICKNAME	FIRST Jennifer M. LAST Dawkins		MI	Date Processed Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO I	BOX PLEASE): APT/SUITE #	‡ CITY Dallas	STATE:	ZIP CODE 75206	
8 CAMPAIGN TREASURER PHONE	AREA CODE (214) 684	PHONE NUMBER 8218	EXTENSION			
9 REPORT TYPE	☐ January 15	30th day before election	Excee	ded Modified	☐ appointmen	ter campaign tresurer il (officeholder only) (Altach- COH-FR)
10 PERIOD COVERED	Month Day 01/01/2020	Yaar THI	ROUGH	Month	Day Yea 07/15/2020	er
11 ELECTION	ELECTION DATE Month Day 11/3/2020	Year ELECTION Year Primar Genera	y 🗍 Rui		Other	
12 OFFICE	OFFICE HELD (If any)		13	OFFICE SOUGH Other Office	T (If known) : Dallas ISD Distr	
		GO TO PA	GE 2			
Forms provided by Texas E	Ihics Commission	www.ethics.state.t	x.us			Revised 1/1/2020

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

			COVER SHEET PG 2
14 C/OH NAME	Alex Enriquez		15 Filer ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	I SUPPORT THE CANDIDATE / OF	LITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURE: FICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITH NDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS	DUT THE CANDIDATE'S OR OFFICERULDER'S T
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		
	SPECIFIC	COMMITTEE ADDRESS	
			<u> </u>
		COMMITTEE CAMPAIGN TREASURER NAME	
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS	1 TOTAL UNITEMIZE OR GUARANTEES	D POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOA OF LOANS OR CONTRIBUTIONS MADE ELECTRONICALLY)	NS, \$0.00
	2 TOTAL POLITICAL (OTHER THAN PLE	CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$32,683,08
EXPENDITURE TOTALS	3 TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$0.00
	4 TOTAL POLITICAL	EXPENDITURES	\$32,551.67
CONTRIBUTION BALANCE	5 TOTAL POLITICAL OF REPORTING PE	CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY PRIOD	\$1,922.83
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD	\$0.00
18 AFFIDAVIT		I swear, or affirm, under penalty of a list rue and correct and includes all I me under Title 15, Election Code.	perjury, that the accompanying report information required to be reported by
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Can	didate or difficeholder
Sworn to and subsci	ribed before me, by the said	Alexander Enriquez	, this the
day of	July 20 20	to certify which, witness my hand and seal of office.	
Signal yre of officer add	ministering oath Pri	Cholas Wied Mainted name of officer administering oath	e of officer administering oath

Forms provided by Texas Ethics Commission

www.athics.state.tx.us

Revised 1/1/2020

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
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$0
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$0
4.	SCHEDULE E: LOANS	\$0
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIE	BUTIONS \$30,760
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTI	RIBUTIONS \$0
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	şo
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$1,791
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUS	SINESS OF C/OH \$0
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONT	TRIBUTIONS \$0
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS TO FILER	RETURNED \$(

SCHEDULE A1

The Ins	truction Gulde explains how to complete this for	Total pages Schedule A1: not available		
2. FILER NAME Alex Enriquez			3. Filer ID (Ethics Commission I	Filers)
4. Date	5. Full name of contributorcut-of-state PAC _		7. Amount of contribution (\$)	
04/14/2020	Alliance of Dallas Educators United Teachers PAC			\$1,000.00
	6. Contributor address; City; State;	ZIP Code		
	334 Centre St Dallas, TX 75208-6504			
8. Principal occup	pation / Job title (See instructions)	9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)	
01/30/2020	Brad Adams			\$516.45
	6. Contributor address; City; State;	ZIP Code		
	6728 Winton St Dallas, TX 75214-2748			
	pation / Job title (See Instructions)		yer (See Instructions)	
Healthcare Ex		So	outhwest Transplant Alliance	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
02/20/2020	Brad Adams			\$1,032.70
	6. Contributor address; City; State;	ZIP Code	i	
	6728 Winton St Dallas, TX 75214-2748			
	pation / Job title (See Instructions)		yer (See Instructions)	
Healthcare Ex		Si	outhwest Transplant Alliance	
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)	
03/02/2020	Amy Anderson			\$51.83
	6. Contributor address; City; State;	ZIP Code		
	6846 Chantilly Ln Dallas, TX 75214-2718			
8. Principal occup stay at home	pation / Job title (See Instructions) mom		yer (See Instructions) I/A	
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)	
01/21/2020	Ed Antal			\$103.45
	6. Contributor address; City; State;	ZIP Code		
	71 Cherry Ln Basking Ridge, NJ 07920-1109			
	pation / Job title (See Instructions)	,	yer (See Instructions)	
Retired		l R	tetired	

SCHEDULE A1

The Instruction Guide explains how to complete this form.					Total pages Schedule A1: not available	
2. FILER NAME Alex Enriquez					3. Filer ID (Ethics Commission Fil	ers)
4. Date	5. Full name of contributor	out-of-stat	e PAC		7. Amount of contribution (\$)	1
06/27/2020	Edward Antal					\$51.83
	6. Contributor address;	City;	State;	ZIP Code		
	71 Cherry Ln Basking Ridge, NJ 0	7920-1109				
8. Principal occup Retired	pation / Job title (See Instructions	s)			yer (See Instructions) etired	
4. Date	5. Full name of contributor	out-of-stat	e PAC		7. Amount of contribution (\$)	
07/01/2020	James Applegate					\$51.83
	6. Contributor address;	Clty;	State;	ZIP Code		
	1409 S Lamar St Apt 953 Dallas,	TX 75215-68	55			
, ,	pation / Job title (See Instructions	s)			yer (See Instructions)	
Director					lity Year Dallas	
4. Date	5. Full name of contributor	out-of-stal	le PAC		7. Amount of contribution (\$)	
03/06/2020	Andrea Berman					\$103.45
	6. Contributor address;	City;	State;	ZIP Code		
	6922 Currin Dr Dallas, TX 75230	-3526				
8. Principal occup Self Employe	pation / Job title (See Instructions d	s)			yer (See Instructions) elf Employed	
4. Date	5. Full name of contributor	out-of-stal	te PAC		7. Amount of contribution (\$)	
01/21/2020	Tyler Bexley					\$500.00
	6. Contributor address;	City;	State;	ZIP Code		
	6016 Bryan Pkwy Dallas, TX 752	06-8002				
E.	pation / Job title (See Instruction	s)			yer (See Instructions)	
Attorney	C C. II.	~ <u>-</u>		R	Leese Marketos LLP	
4. Date	5. Full name of contributor	out-of-sta	te PAC		7. Amount of contribution (\$)	
02/21/2020	Robert Blumenstock					\$103.45
	6. Contributor address;	Clty;	State;	ZIP Code		
	4044 Sperry St Dallas, TX 75214-					2
` `	pation / Job title (See Instructions	6)		1 '	yer (See Instructions)	
Self Employe	ed			S	elf Employed	

SCHEDULE A1

The ins	truction Guide explains how to complete ti	Total pages Schedule A1: not available		
2. FILER NAME Alex Enriquez	11 and a \$4102 track country to the country of the		3. Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributorout-of-state	PAC	7. Amount of contribution (\$)	
02/07/2020	Lauren Bochner		\$37.37	
	6. Contributor address; City; S	itate; ZIP Code		
	150 E 69th St Apt 3Q New York, NY 10021-572	.2		
8. Principal occup Executive	pation / Job title (See Instructions)		yer (See Instructions) lice + olivia	
4. Date	5. Full name of contributor out-of-state	PAC	7. Amount of contribution (\$)	
03/05/2020	Robyn Boren		\$26.01	
	6. Contributor address; Clty; S	state; ZIP Code		
	8701 Southwestern Blvd Dallas, TX 75206-2700	,		
	pation / Job title (See Instructions)		yer (See Instructions)	
Marketing Market		D	Pallas Regional Chamber	
4. Date	5. Full name of contributorout-of-state	PAC	7. Amount of contribution (\$)	
06/26/2020	Brenda Bradford		\$103.45	
	6. Contributor address; City; S	State; ZIP Code	Į	
	6211 W Northwest Hwy Apt 1101 Dallas, TX 75	225-3424		
8. Principal occup Retired	pation / Job title (See Instructions)		yer (See Instructions) Letired	
4. Date	5. Full name of contributorout-of-state	PAC	7. Amount of contribution (\$)	
01/27/2020	Julie Broberg		\$516.45	
	6. Contributor address; City; S	State; ZIP Code		
	6945 Tokalon Dr Dallas, TX 75214-3829		l	
	pation / Job title (See Instructions)	1 7 7	yer (See Instructions)	
Homemaker		<u>s</u>	BDM Chair, Woodrow Wilson High School	
4. Date	5. Full name of contributorout-of-state	PAC	7. Amount of contribution (\$)	
03/04/2020	Julie Broberg		\$258.32	
	6. Contributor address; City; S	State; ZIP Code		
	6945 Tokalon Dr Dallas, TX 75214-3829			
8. Principal occup	pation / Job title (See Instructions)		yer (See Instructions)	
Homemaker		S	BDM Chair, Woodrow Wilson High School	

SCHEDULE A1

The Instruction Guide explains how to complete this form.				Total pages Schedule A1: not available		
2. FILER NAME Alex Enriquez					3. Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributor	oul-of-state P	AC		7. Amount of contribution (\$)	
06/26/2020	Julie Broberg				\$532.9	7
	6. Contributor address;	City; Sta	ate; Zl	P Code		
	6945 Tokalon Dr Dallas, TX 75214-	3829				
' '	pation / Job title (See Instructions)				ver (See Instructions)	
Homemaker				SI	BDM Chair, Woodrow Wilson High School	
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of contribution (\$)	
01/14/2020	Lindsey Bruning				\$103.4	5
	6. Contributor address;	City; Sta	ate; ZI	P Code		
	6501 Mccommas Blvd Dallas, TX 7	5214-3110				
	pation / Job title (See Instructions)				yer (See Instructions)	
Attorney				Ze	elle LLP	
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of contribution (\$)	
01/21/2020	Darryl Bundrige				\$26.0	1
	6. Contributor address;	City; Sta	ate; Zi	P Code		
	317 Derwyn Rd Lansdowne, PA 190	050-1027				
8. Principal occup Executive	pation / Job title (See Instructions)				ver (See Instructions) ity Year	
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of contribution (\$)	
01/28/2020	Kalo Butcher				\$2,500.0	0
	6. Contributor address;	City; Sta	ate; Z	P Code		
	5435 Richmond Ave Dallas, TX 752	206-7149				
8. Principal occup Owner	pation / Job title (See Instructions)				yer (See Instructions) iad Tile LLC	
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of contribution (\$)	
01/20/2020	Brian Corrigan				\$103.4	5
	6. Contributor address;	City; Sta	ate; Z	P Code		
	5912 9th St N Arlington, VA 22205	-1402				
I ' '	pation / Job title (See Instructions)				yer (See Instructions)	
Attorney				G	reenleaf Health, Inc.	

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

Revised 1/1/2020

SCHEDULE A1

The Instruction Guide explains how to complete this form.					Total pages Schedule A1: not available	
2. FILER NAME Alex Enriquez				10127	3. Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state F	AC		7. Amount of contribution (\$)	
01/16/2020	Janis Cravens				\$516.45	
	6. Contributor address;	City; St	ate; Z	IP Code		
	4241 Bordeaux Ave Dallas, TX 752	205-3717				
8. Principal occup Retired	pation / Job title (See Instructions)				ver (See Instructions) elf Employed	
4. Date	5. Full name of contributor	out-of-slate F	AC		7. Amount of contribution (\$)	
04/30/2020	Micah Crissey				\$103.45	
	6. Contributor address;	City; St	ate; Z	IP Code		
	101 S Brookside Dr Apt 2012 Dalla	ns, TX 75214-4	1584		6	
	pation / Job title (See Instructions)				ver (See Instructions)	
Education- H				In	carnation Academy	
4. Date	5. Full name of contributor	out-of-state f	PAC		7. Amount of contribution (\$)	
02/20/2020	Amy Cuccia				\$258.32	
	6. Contributor address;	City; St	ate; Z	IP Code		
	6442 Anita St Dallas, TX 75214-27	04			72	
8. Principal occup Assistant Prin	pation / Job title (See Instructions)				ver (See instructions) he Episcopal School of Dallas	
4. Date	5. Full name of contributor	out-of-state f	PAC		7. Amount of contribution (\$)	
06/30/2020	Amy Cuccia				\$103.45	
	6. Contributor address;	City; St	ate; Z	IP Code		
	6442 Anita St Dallas, TX 75214-27	04				
	pation / Job title (See Instructions))			yer (See Instructions)	
Assistant Prin				1	he Episcopal School of Dallas	
4. Date	5. Full name of contributor	out-of-state i	PAC		7. Amount of contribution (\$)	
01/15/2020	Jenn Dawkins				\$350.00	
	6. Contributor address;	City; St	ate; Z	iP Code		
	5315 Vickery Blvd Dallas, TX 7520	06-6228				
8. Principal occup PTA Presiden	pation / Job title (See Instructions) at)		9 Employ	ver (See Instructions)	

SCHEDULE A1

The Instruction Guide explains how to complete this form.					Total pages Schedule A1: not available	
2. FILER NAME Alex Enriquez					3. Filer ID (Ethics Commission F	Filers)
4. Date	5. Full name of contributor	Out-of-E	state PAC	***************************************	7. Amount of contribution (\$)	
01/21/2020	Jenn Dawkins					\$100.00
	6. Contributor address;	City;	State;	ZIP Code		
	5315 Vickery Bivd Dallas, TX 75	206-6228				
8. Principal occup PTA Presiden	pation / Job title (See Instruction	s)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution (\$)	
03/10/2020	Jenn Dawkins					\$350.00
	6. Contributor address;	City;	State;	ZIP Code	,	
	5315 Vickery Blvd Dallas, TX 75	206-6228				
8. Principal occup PTA Presider	pation / Job title (See Instruction	s)		9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	Out-of-	state PAC		7. Amount of contribution (\$)	
02/19/2020	Gina Deitz					\$51.83
	6. Contributor address;	City;	State;	ZIP Code		
	6434 Kenwood Ave Dallas, TX 7	5214-3165				
8. Principal occup Homemaker	pation / Job title (See Instruction	s)			yer (See Instructions) lot Employed	
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of contribution (\$)	
03/01/2020	Ben DuBose					\$258.32
E	6. Contributor address;	City;	State;	ZIP Code		
	3620 Vintage Pl Dallas, TX 7521	4-3270				
1	pation / Job title (See Instruction	s)		,	yer (See Instructions)	
Attorney	5. Full name of contributor				DuBose Law Firm	
4. Date		out-of-	slate PAC		7. Amount of contribution (\$)	
03/06/2020	Michael Dunagan				¥	\$258.32
	6. Contributor address;	City;	State;	ZIP Code		
	3310 Fairmount St Apt 10A Dails		1-1238			
	pation / Job title (See Instruction	is)		,	yer (See Instructions)	
Attorney				J:	ameson & Dunagan, P.C.	

SCHEDULE A1

The Ins	struction Guide explains how t	Total pages Schedule A1: not available			
2. FILER NAME Alex Enriquez				3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/09/2020	Laura Duty			9	103.45
	6. Contributor address;	City; State	ZIP Code		
	6025 Bryan Pkwy Dallas, TX 752	1008-800			
	pation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	
Nonprofit Co	nsultant		L	aura Duty & Associates, LLC	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/11/2020	Laura Duty			5	3103.45
	6. Contributor address;	City; State	ZIP Code		
	6025 Bryan Pkwy Dallas, TX 752	1008-800			
	pation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	
Nonprofit Co	nsultant		L	aura Duty & Associates, LLC	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/15/2020	Harryette Ehrhardt				\$50.00
	6. Contributor address;	City; State	; ZIP Code		
	5731 Swiss Ave Dallas, TX 7521	4-4638			
8. Principal occu Retired	pation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/04/2020	Shannon Enriquez				\$206.70
	6. Contributor address;	City; State	ZIP Code		
	9731 Tralee Dr Dallas, TX 75218	3-2839			
	pation / Job title (See Instruction	s)		yer (See Instructions)	
Retired			S	elf	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/05/2020	Shannon Enriquez				\$103.45
	6. Contributor address;	City; State	; ZIP Code		
	9731 Traice Dr Dallas, TX 75218	3-2839			
,	pation / Job title (See Instruction	s)		yer (See Instructions)	
Retired			S	elf	

SCHEDULE A1

The instruction Guide explains how to complete this form.					Total pages Schedule A1: not available	
2. FILER NAME Alex Enriquez					3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state F	AC		7. Amount of contribution (\$)	
06/26/2020	Shannon Enriquez					\$213.93
	6. Contributor address;	City; St	ate; Zi	P Code		
	9731 Tralee Dr Dallas, TX 75218-	2839				
8. Principal occup Retired	pation / Job title (See Instructions	s)			ver (See Instructions) elf	
4. Date	5. Full name of contributor	out-of-state F	PAC		7. Amount of contribution (\$)	
02/26/2020	Carrie Fisketjon					\$258.32
	6. Contributor address;	City; St	ate; Zl	P Code		
	6347 Chesley Ln Dallas, TX 7521	4-2120				
8. Principal occup Homemaker	pation / Job title (See Instructions	5)			yer (See Instructions) sketjon	
4. Date	5. Full name of contributor	out-of-state F	PAC	L	7. Amount of contribution (\$)	
07/10/2020	Carrie Fisketjon	_		-		\$103.45
	6. Contributor address;	City; St	ate; Zl	P Code		ψ. 05.110
	6347 Chesley Ln Dallas, TX 7521	4-2120				
8. Principal occup Homemaker	pation / Job title (See Instructions	s)		, ,	ver (See Instructions) isketjon	
4. Date	5. Full name of contributor	out-of-slate F	PAC		7. Amount of contribution (\$)	
06/22/2020	Andrew Fortin					\$500.00
	6. Contributor address;	City; St	ate; Z	P Code		
	5116 Worth St Dallas, TX 75214-	5350				
8. Principal occup Senior Vice P	pation / Job title (See Instructions	3)			yer (See Instructions) ssocia	
4. Date	5. Full name of contributor	Out-of-state F	240		7. Amount of contribution (\$)	
01/28/2020	Elizabeth Furth	out-or-state i	-AC		(V)	
	6. Contributor address;	City; St	ate; Z	P Code		\$103.45
	6342 Chesley Ln Dallas, TX 7521	• '				
8. Principal occur	pation / Job title (See Instruction			9 Employ	/er (See Instructions)	
, ,	oking for the Crowd-Charity Caterir	•			ooking for the Crowd	

SCHEDULE A1

The Instruction Guide explains how to complete this form.				Total pages Schedule A1: not available		
2. FILER NAME Alex Enriquez					3. Filer ID (Ethics Commission F	llers)
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of contribution (\$)	
02/20/2020	Elizabeth Furth					\$258.32
	6. Contributor address;	City;	State;	ZIP Code		
	6342 Chesley Ln Dallas, TX 752	14-2119				
	pation / Job title (See Instruction oking for the Crowd-Charity Cateri	•			yer (See Instructions) ooking for the Crowd	
4. Date	5. Full name of contributor		state PAC		7. Amount of contribution (\$)	
01/27/2020	Betty Gallagher	_	-			\$51.83
	6. Contributor address;	City;	State;	ZIP Code		Ψυ1.03
	5630 Gaston Ave Dallas, TX 752	14-4682				
8. Principal occup Retired	pation / Job title (See Instruction	s)			yer (See Instructions)	
4. Date	5. Full name of contributor	Tout-of-s	state PAC		7. Amount of contribution (\$)	
03/04/2020	Betty Gallagher		-			\$51.83
	6. Contributor address;	City;	State;	ZIP Code		451102
	5630 Gaston Ave Dallas, TX 752	14-4682				
8. Principal occup Retired	pation / Job title (See Instruction	s)			yer (See Instructions) NSD	
4. Date	5. Full name of contributor	Out-of-	state PAC		7. Amount of contribution (\$)	
07/10/2020	Elizabeth Gallagher					\$26.01
	6. Contributor address;	Clty;	State;	ZIP Code		
	5630 Gaston Ave Dallas, TX 752	14-4682				
8. Principal occup retired teache	pation / Job title (See Instruction	e)		1	yer (See Instructions)	
4. Date	5. Full name of contributor		state PAC	3	elf Employed 7. Amount of contribution (\$)	
02/20/2020	Robert Garrett		State PAC		(4,	
	6. Contributor address;	City;	State:	ZIP Code		\$258,32
	3216 Jacotte Cir Dallas, TX 7521	•	Olulo,	_, 0000		
8 Principal occur	pation / Job title (See Instruction		w.v	9 Employ	yer (See Instructions)	
Executive		·-/			reenlots	

SCHEDULE A1

The Ins	truction Guide explains how to c	Total pages Schedule A1: not available			
2. FILER NAME Alex Enriquez				3. Filer ID (Ethlos Commission F	llers)
4. Date	5. Full name of contributor	out-of-state PAC	2193037.0.11	7. Amount of contribution (\$)	- II-v - mailtaile - mailt
02/20/2020	Carrie Garst				\$206,70
	6. Contributor address;	City; State;	ZIP Code		
	5024 Worth St Dallas, TX 75214-534	45			
8. Principal occuj Teacher	pation / Job title (See Instructions)			yer (See Instructions) he children's center	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/13/2020	Rosemary Goodman				\$51.83
	6. Contributor address;	Clty; State;	ZIP Code		
	8600 Thackery St Apt 2104 Dallas, T	TX 75225-3928			
8. Principal occup Volunteer	pation / Job title (See Instructions)			yer (See Instructions) elf	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/17/2020	Aaron Gougis				\$26.01
	6. Contributor address;	City; State;	ZIP Code		
	2906 E Kiest Blvd Apt K26 Dallas, 7	TX 75216-2778	2		
8. Principal occup Director	pation / Job title (See Instructions)			yer (See Instructions) ity Year	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/09/2020	Holly Greef				\$103.45
	6. Contributor address;	City; State;	ZIP Code	ĺ	
	6665 Lakewood Blvd Dallas, TX 752	214-3748			
	pation / Job title (See Instructions)			yer (See Instructions)	
Retired	E l'all name of soutributes =			etired	
4. Date	-	out-of-slate PAC		7. Amount of contribution (\$)	
01/21/2020	Deborah Hack				\$516.45
	6. Contributor address;	Clty; State;	ZIP Code		
	1078 Wimbleton Dr Birmingham, M	I 48009-7605			
8. Principal occup Retired	pation / Job title (See Instructions)			yer (See Instructions) etired	
Kented			, R	enea	

SCHEDULE A1

The Ins	struction Guide explains how to co	Total pages Schedule A1: not available			
2. FILER NAME Alex Enriquez				3. Filer ID (Ethics Commission F	llers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/04/2020	Deborah Hack				\$103.45
	6. Contributor address; C	City; State;	ZIP Code		
	1078 Wimbleton Dr Birmingham, MI	48009-7605			
	pation / Job title (See Instructions)			ver (See Instructions)	
Retired			Re	etired	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/04/2020	Deborah Hack				\$103.45
	6. Contributor address; C	City; State;	ZIP Code		
	1078 Wimbleton Dr Birmingham, MI	48009-7605			
	pation / Job title (See Instructions)			ver (See Instructions)	
Retired	The same of the sa		Re	etired.	Waxaa La
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/13/2020	Stephanie Haley				\$103.45
	6. Contributor address; C	City; State;	ZIP Code		
	7144 Aberdeen Ave Dallas, TX 75230	-5407			
8. Principal occup Volunteer	pation / Job title (See Instructions)			ver (See Instructions)	ar head
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/20/2020	Katherine Harmon				\$103.45
	6. Contributor address; C	City; State;	ZIP Code		
	6521 Ellsworth Ave Dallas, TX 75214	-2725			
8. Principal occup retired	pation / Job title (See Instructions)		9 Employ	ver (See Instructions) A	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/21/2020	Amy And Ben Harms	1.57			\$309.95
	6. Contributor address; C	City; State;	ZIP Code		
	5918 Worth St Dallas, TX 75214-4499)		- IKOWA II - Walata Walata Walata	
	pation / Job title (See Instructions)			ver (See Instructions)	
Director of B	rand Strategy		A'	T&T	

SCHEDULE A1

The ins	struction Guide explains how to	Total pages Schedule A1; not available				
2. FILER NAME Alex Enriquez					3. Filer ID (Ethics Commission F	liers)
4. Date	5. Full name of contributor	out-of-state	PAC _		7. Amount of contribution (\$)	
06/26/2020	Wendy Hatchell					\$103.45
	6. Contributor address;	City;	State;	ZIP Code		
	6123 Lakeshore Dr Dallas, TX 75	214-3609				
8. Principal occup Manager	pation / Job title (See Instructions	3)			yer (See Instructions) IcCarthy	
4. Date	5. Full name of contributor	out-of-state	PAC _		7. Amount of contribution (\$)	
02/27/2020	Cindy Herb					\$51.83
	6. Contributor address;	City;	State;	ZIP Code		
	1516 Deer Creek Dr Desoto, TX 7	5115-3697				
8. Principal occup Retired	pation / Job title (See Instructions	3)			yer (See Instructions) etired	
4. Date	5. Full name of contributor	out-of-state	PAC _		7. Amount of contribution (\$)	
03/04/2020	Cindy Herb					\$53.89
	6. Contributor address;	City;	State;	ZIP Code		
	1516 Deer Creek Dr Desoto, TX 7	5115-3697				
8. Principal occuj Retired	pation / Job title (See Instructions	s)			yer (See Instructions) etired	
4. Date	5. Full name of contributor	out-of-state	PAC _		7. Amount of contribution (\$)	
02/10/2020	Thomas Hogue					\$60.00
	6. Contributor address;	Clty;	State;	ZIP Code		
	5924 Bryan Pkwy Dallas, TX 752	06-8133				
	pation / Job title (See Instructions	s)			yer (See Instructions)	
Retired	5. Full name of contributor			R	etired	
4. Date		out-of-state	e PAC		7. Amount of contribution (\$)	
06/26/2020	Jessica Horn		.			\$51.83
	6. Contributor address;	•	State;	ZIP Code		
	729 Ridgeway St Dallas, TX 7521				NECONOCICE SIGNIFICATION TO THE WINDS AND THE CONTROL OF THE CONTR	
8. Principal occup Banking	pation / Job title (See Instructions	3)			yer (See Instructions) eritex Bank	
Danking				, v	OLIGA DRIIK	

SCHEDULE A1

The Ins	truction Guide explains how to	Total pages Schedule A1; not available			
2. FILER NAME Alex Enriquez				3. Filer ID (Ethics Commission Fi	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/08/2020	Mendy Hovland				\$103.45
	6. Contributor address;	City; State;	ZIP Code		
	16 Seaton Pl NW Washington, DC	20001-1034			
	oation / Job title (See Instructions)		yer (See Instructions)	
Momager			U	nemployed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/20/2020	Brent Huebner				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	6816 Sperry St Dallas, TX 75214-2	2852			
	eation / Job title (See Instructions)		yer (See Instructions)	
Architect			D	evenney Group Ltd.	
4. Date	5. Full name of contributor	Out-of-state PAC		7. Amount of contribution (\$)	
01/14/2020	James Infanzon				\$51.83
	6. Contributor address;	City; State;	ZIP Code		
	13 Townpark Ln Apt C Charleston	, SC 29412-1513			
8. Principal occup Student	eation / Job title (See Instructions)		yer (See Instructions) tudent	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/23/2020	Wilson Johnson				\$516.45
	6. Contributor address;	City; State;	ZIP Code		
	3613 Vintage Pl Dallas, TX 75214	-3269			
8. Principal occup Homemaker	pation / Job title (See Instructions)		yer (See Instructions) elf Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/27/2020	Wilson Johnson				\$51.83
	6. Contributor address;	City; State;	ZIP Code		
	3613 Vintage Pl Dallas, TX 75214	-3269			
, ,	pation / Job title (See Instructions)		yer (See Instructions)	
· Homemaker	A CONTRACTOR OF THE CONTRACTOR		26	elf Employed	

SCHEDULE A1

The Ins	struction Guide explains how	Total pages Schedule A1: not available				
2. FILER NAME Alex Enriquez					3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-s	late PAC		7. Amount of contribution (\$)	
02/26/2020	Margaret Karnowski					\$51.83
	6. Contributor address;	City;	State;	ZIP Code		7.5.5.5
	5921 Worth St Dallas, TX 75214	-4456				
8. Principal occup Counselor	pation / Job tille (See Instruction	ıs)		1	yer (See Instructions) tichardson ISD	
4. Date	5. Full name of contributor	Out-of-s	tale PAC		7. Amount of contribution (\$)	
01/26/2020	Greg Kimber					\$26.01
	6. Contributor address;	City;	State;	ZIP Code		
	5342 Miller Ave Dallas, TX 7520	06-6423				
8. Principal occur Bus driver	pation / Job title (See Instruction	ıs)			yer (See Instructions) DISD	
4. Date	5. Full name of contributor	Out-of-6	itate PAC		7. Amount of contribution (\$)	A 4144 A
02/07/2020	Dawn Kossmann					\$51.83
	6. Contributor address;	City;	State;	ZIP Code		
	6024 Bryan Pkwy Dallas, TX 752	206-8002				
8. Principal occup Administrativ	pation / Job title (See Instruction re Assistant	is)			yer (See Instructions) City of University Park	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution (\$)	16.0.1000.00.00
02/20/2020	Eric Kraft					\$516.45
	6. Contributor address;	Clty;	State;	ZIP Code		*******
	7039 Lakeshore Dr Dallas, TX 73	5214-3553				
	pation / Job title (See Instruction	ns)			yer (See Instructions)	
Banker					Comerica	
4. Date	5. Full name of contributor	out-of-s	alate PAC		7. Amount of contribution (\$)	
02/07/2020	Seth Kranz					\$103.45
	6. Contributor address;	City;	State;	ZIP Code		
	5829 Richmond Ave Dallas, TX				1	
8. Principal occup	pation / Job title (See Instruction	ns)			yer (See Instructions) Cronos	
Sales				l F	AOHOS	

SCHEDULE A1

The Ins	truction Guide explains how to complete thi	Total pages Schedule A1: not available		
2. FILER NAME Alex Enriquez		***************************************	3. Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributorout-of-state P/	/c	7. Amount of contribution (\$)	
02/07/2020	Kathleen Lewis		\$258.32	
	6. Contributor address; Clty; Sta	te; ZIP Code		
	5595 E Arroyo Verde Dr Paradise Valley, AZ 8525	3-4252		
8. Principal occup Retired	pation / Job title (See Instructions)	The state of the s	ver (See Instructions) etired	
4. Date	5. Full name of contributor out-of-state P.	4C	7. Amount of contribution (\$)	
07/13/2020	Michael Lombardo		\$206.70	
	6. Contributor address; City; Sta	ite; ZIP Code		
	548 Market St # PMB98100 San Francisco, CA 94	104-5401		
8. Principal occup Executive	pation / Job title (See Instructions)		yer (See Instructions) ookNook Inc	
4. Date	5. Full name of contributorout-of-state P.	AC	7. Amount of contribution (\$)	
02/20/2020	Chris Loper		\$258.32	
	6. Contributor address; City; Sta	ite; ZIP Code		
	4324 Santa Barbara Dr Dallas, TX 75214-2841			
8. Principal occup self employed	pation / Job title (See instructions) i		yer (See Instructions) elf employed	
4. Date	5. Full name of contributorout-of-state P	AC	7. Amount of contribution (\$)	
03/03/2020	Jan Mallett		\$516.45	
	6. Contributor address; City; Sta	ite; ZIP Code		
	7007 Northaven Rd Dallas, TX 75230-3504			
8. Principal occup Professor	pation / Job title (See Instructions)	,	yer (See Instructions) MU	
4. Date	5. Full name of contributorout-of-state P	AC	7. Amount of contribution (\$)	
01/28/2020	Pete Marketos		\$5,000.00	
	6. Contributor address; City; Sta	ate; ZIP Code		
	7189 Greentree Ln Dallas, TX 75214-1928			1400-1
1	pation / Job title (See Instructions)		yer (See Instructions)	
Attorney		R	eese Marketos LLP	

SCHEDULE A1

The Ins	truction Gulde explains how to complete	Total pages Schedule A1: not available			
2. FILER NAME Alex Enriquez				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributorout-of-st	ate PAC		7. Amount of contribution (\$)	
01/24/2020	Gia Marshello				\$103.45
	6. Contributor address; City;	State; 2	ZIP Code		
	6224 Oram St Unit 3 Dallas, TX 75214-3980				
8. Principal occup Realtor	nation / Job title (See Instructions)		, ,	ver (See Instructions)	
4. Date	5. Full name of contributorout-of-st	late PAC		7. Amount of contribution (\$)	
07/12/2020	Carly Allison McCullar				\$26,01
	6. Contributor address; City;	State;	ZIP Code		
	2414 Driftway Dr Dallas, TX 75228-5910				
	oatlon / Job title (See Instructions) scher for Dallas ISD			rer (See Instructions) ISD	
4. Date	5. Full name of contributorout-of-st	late PAC	***************************************	7. Amount of contribution (\$)	****
01/29/2020	Casey McCullar				\$51.83
	6. Contributor address; City;	State;	ZIP Code		
	1511 Flemming Dr Longmont, CO 80501-101	0			
8. Principal occup Manager	eation / Job title (See Instructions)			ver (See Instructions) aisala	
4. Date	5. Full name of contributorout-of-st	tate PAC		7. Amount of contribution (\$)	7.7 7
07/11/2020	Dawn McCullar				\$51.83
	6. Contributor address; City;	State;	ZIP Code		
	2414 Driftway Dr Dallas, TX 75228-5910				
8. Principal occup Teacher	pation / Job title (See Instructions)			ver (See Instructions)	
4. Date	5. Full name of contributorout-of-st	tate PAC		7. Amount of contribution (\$)	
07/11/2020	Terry McCullar				\$26.01
	6. Contributor address; City;	State;	ZIP Code		
	2414 Driftway Dr Dallas, TX 75228-5910				
	pation / Job title (See Instructions)			ver (See Instructions)	
Executive			M	lesquite Chamber of Commerce	

SCHEDULE A1

	truction Guide explains how to	Total pages Schedule A1: not available				
2. FILER NAME Alex Enriquez	AND WAY OF THE PROPERTY OF THE		usvenské over		3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-s	late PAC		7. Amount of contribution (\$)	
02/20/2020	Tina Meazell					\$103.45
	6. Contributor address;	City;	State;	ZIP Code		
	6544 Lange Cir Dallas, TX 75214-	2489				
8. Principal occup Advertising	pation / Job title (See Instructions)		3	yer (See Instructions) elf Employed	
4. Date	5. Full name of contributor	out-of-s	slate PAC		7. Amount of contribution (\$)	
03/08/2020	Elayna Mitchell					\$51.83
	6. Contributor address;	City;	State;	ZIP Code		
	5323 Tremont St Dallas, TX 75214	1-5045				
	pation / Job title (See Instructions	;)			yer (See Instructions)	
Self Employe				Se	elf Employed	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution (\$)	
07/10/2020	Nick Nepveux					\$103.45
	6. Contributor address;	City;	State;	ZIP Code		
	718 Dumas St Dallas, TX 75214-4	915				
8. Principal occup Architect	pation / Job title (See Instructions)			yer (See Instructions) Henn Partners	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution (\$)	
07/10/2020	Kristin Newby					\$26.01
	6. Contributor address;	City;	State;	ZIP Code		
	7038 Fairdale Ave Dallas, TX 752	27-5727				
	pation / Job title (See Instructions	;}	WW-1172-2-72		yer (See Instructions) SJM Law	
Attorney 4. Date	5. Full name of contributor				7. Amount of contribution (\$)	
		out-of-s	state PAC		7. Altiount of Contribution (w)	
01/31/2020	Martha Norton	011		717 0 1		\$309,95
	6. Contributor address;	City;	State;	ZIP Code		
	7220 Tokalon Dr Dallas, TX 7521					
	oation / Job title (See Instructions	s)			yer (See Instructions)	
Occupational	Therapist			F	irst Unitarian Church of Dallas	

SCHEDULE A1

The Instruction Guide explains how to complete this form.					Total pages Schedule A1: not available
2. FILER NAME Alex Enriquez		3. 3. 4 AVA V			3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of contribution (\$)
01/27/2020	Larry Offutt				\$258.32
	6. Contributor address;	City; S	tate;	ZIP Code	
	6038 Bryan Pkwy Dallas, TX 75	206-8002			
8. Principal occup	pation / Job title (See Instruction	ıs)			yer (See Instructions) elf
4. Date	5. Full name of contributor	Out-of-state	PAC		7. Amount of contribution (\$)
02/07/2020	Lany Offutt				\$258.32
	6. Contributor address;	City; S	tate;	ZIP Code	
	6038 Bryan Pkwy Dallas, TX 75	206-8002			
	pation / Job title (See Instruction	is)			yer (See Instructions)
Risk Manage				S	elf (a)
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of contribution (\$)
03/12/2020	Larry Offlutt				\$155.08
	6. Contributor address;	City; S	tate;	ZIP Code	
v==	6038 Bryan Pkwy Dallas, TX 75	206-8002			
8. Principal occuprisk manager	pation / Job title (See Instruction	ns)			yer (See Instructions) elf
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of contribution (\$)
06/27/2020	Larry Offutt				\$103.45
	6. Contributor address;	City; S	tate;	ZIP Code	
	6038 Bryan Pkwy Dallas, TX 75	206-8002			
8. Principal occup risk manager	pation / Job title (See Instruction	ns)			yer (See Instructions) elf
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of contribution (\$)
07/10/2020	Larry Offutt				\$103.45
	6. Contributor address;	Clty; S	tate;	ZIP Code	·
	6038 Bryan Pkwy Dallas, TX 75	206-8002			
	pation / Job title (See Instruction	ns)			yer (See Instructions)
risk manager				se	elf

SCHEDULE A1

The Ins	truction Gulde explains how to	Total pages Schedule A1: not available			
2. FILER NAME Alex Enriquez				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/13/2020	Suzee Oliphint				\$51.83
	6. Contributor address;	City; State;	ZIP Code		
	5754 Belmont Ave Dallas, TX 752	06-6802			
8. Principal occup Retired	pation / Job title (See Instructions	;)	9 Employ	yer (See Instructions) A	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	100.000
07/10/2020	Lora Owens				\$51.83
	6. Contributor address;	City; State;	ZIP Code		ŕ
	5600 Victor St Dallas, TX 75214-4	4733			
1000	pation / Job title (See Instructions	;)		/er (See Instructions)	
Educator			D	allas ISD	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/13/2020	Carla Percival-Young				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	6335 W Northwest Hwy Apt 1217	Dallas, TX 75225-3	3548		
8. Principal occup Retired	pation / Job title (See Instructions	5)		yer (See Instructions) etired	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/13/2020	Margaret Phife				\$51.83
	6. Contributor address;	City; State;	ZIP Code		
	6029 Oram St Dallas, TX 75206-7	233			
8. Principal occup NA	pation / Job title (See Instructions	3)	9 Employ N	yer (See Instructions) A	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/21/2020	Neset Pirkul			1	\$2,500.00
	6. Contributor address;	City; State;	ZiP Code		,
	655 Kessler Reserve Ct Dallas, TX	K 75208-0100			
8. Principal occur	pation / Job title (See Instructions	s)	9 Employ	yer (See Instructions)	
Principal			C	edar Springs Capital	

SCHEDULE A1

The ins	truction Guide explains how to	Total pages Schedule A1: not available				
2. FILER NAME Alex Enriquez					3. Filer ID (Ethics Commission File	ers)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of contribution (\$)	
01/15/2020	Angelica Portillo					\$20.85
	6. Contributor address;	City;	State;	ZIP Code		
	6808 Skillman St Apt 1319 Dallas,	TX 75231	-5805			
8. Principal occup Director	pation / Job title (See Instructions)			yer (See Instructions) vallas Afterschool	
4. Date	5. Full name of contributor	out-of-s	tale PAC		7. Amount of contribution (\$)	
03/04/2020	Angelica Portillo					\$20.85
	6. Contributor address;	Clty;	State;	ZIP Code		,
	6808 Skillman St Apt 1319 Dallas,	TX 75231	-5805			
8. Principal occup	pation / Job title (See Instructions)			yer (See Instructions)	
Director	P			D	Pallas Afterschool	
4. Date	5. Full name of contributor	out-of-s	itale PAC		7. Amount of contribution (\$)	
04/30/2020	Angelica Portillo					\$26.01
	6. Contributor address;	City;	State;	ZIP Code		
	6808 Skillman St Apt 1319 Dallas	TX 75231	-5805			
8. Principal occup Director	pation / Job title (See Instructions	s)			yer (See Instructions) vallas Afterschool	
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of contribution (\$)	
06/30/2020	Angelica Portillo					\$31.18
	6. Contributor address;	Clty;	State;	ZIP Code		
	6808 Skillman St Apt 1319 Dallas	, TX 75231	i-5805			
1 '	pation / Job title (See Instructions	i)			yer (See Instructions)	
Director	5. Full name of contributor				Dailas Afterschool	
4. Date		out-of-s	slate PAC		7. Amount of contribution (\$)	
02/20/2020	Donna Rainey					\$103.45
	6. Contributor address;	City;	State;	ZIP Code		
	7182 W Circle Dr Dallas, TX 7521					
	pation / Job title (See Instructions	5)		- 1	yer (See Instructions)	
Sales				F	ff	

SCHEDULE A1

The Ins	struction Guide explains how to	Total pages Schedule A1: not available			
2. FILER NAME Alex Enriquez				3. Filer ID (Ethics Commission F	Filers)
4. Date	5. Full name of contributor	aut-of-state PAC		7. Amount of contribution (\$)	
02/12/2020	David Rutenberg				\$1,032.70
	6. Contributor address;	City; State;	ZIP Code		•
	155 Lexington Ave New York, NY	10016-8154			
8. Principal occup Attorney	pation / Job title (See Instructions)		1	yer (See Instructions) OL	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/27/2020	Mindy Satterwhite				\$51.83
	6. Contributor address;	City; State;	ZIP Code		47.5.5
	6960 Tokalon Dr Dallas, TX 75214	-3828			
8. Principal occup	pation / Job title (See Instructions)			yer (See Instructions)	
Self employe			M	lindy Satterwhite	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/25/2020	Lindsay Sims				\$51.83
	6. Contributor address;	City; State;	ZIP Code		
	6005 Bryan Pkwy Dallas, TX 75206	i-8001			
8. Principal occup Speech patho	pation / Job title (See Instructions) logist	5		yer (See Instructions) ate rehab	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/25/2020	Lindsay Sims				\$103.45
	6. Contributor address;	City; State;	ZIP Code		
	6005 Bryan Pkwy Dallas, TX 75206	5-8001			
	pation / Job title (See Instructions)			yer (See Instructions)	
Speech patho			P	ate rehab	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/22/2020	Patty Slutsky				\$26.01
	6. Contributor address;	City; State;	ZIP Code		
	807 S 6th St Philadelphia, PA 1914	7-3001			
1	pation / Job title (See Instructions)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		yer (See Instructions)	
Executive			C	atchafire.org	

SCHEDULE A1

The Instruction Guide explains how to complete this form.				Total pages Schedule A1: not available		
2. FILER NAME Alex Enriquez					3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	Out-of-s	alate PAC		7. Amount of contribution (\$)	
02/12/2020	Laura Smith					\$155.08
	6. Contributor address;	City;	State;	ZIP Code		
	700 Baylor St Austin, TX 78703-4	1934				
8. Principal occup Retired attorn	pation / Job title (See Instructions ey	3)			yer (See Instructions) etired	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution (\$)	
06/27/2020	Doug Stanglin					\$51.83
	6. Contributor address;	City;	State;	ZIP Code		
	1600 N Oak St Apt 1225 Arlington	n, VA 2220	09-2767			
8. Principal occup Writer	pation / Job title (See Instructions	3)			yer (See Instructions) annett	
4. Date	5. Full name of contributor	out-of-	stale PAC		7. Amount of contribution (\$)	
02/29/2020	Susan Stich				ĺ	\$26.01
	6. Contributor address;	City;	State;	ZIP Code		
	5211 Victor St Dallas, TX 75214-	5446				
8. Principal occup Sales manage	pation / Job title (See Instructions r	3)			yer (See Instructions) Jaska Airlines	
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of contribution (\$)	
02/05/2020	Chad Stockton					\$103.45
	6. Contributor address;	City;	State;	ZIP Code		
	6102 Gaston Ave Dallas, TX 7521	14-4326			7/1	
	pation / Job title (See Instructions	3)			yer (See Instructions)	
4. Date	ctor/Writer/Founder 5. Full name of contributor				aprock Creative 7. Amount of contribution (\$)	
02/07/2020	Christy Tabor	[] out-oi-	atete PAC		7. Miloditt of Continuation (4)	
02/0//2020	6. Contributor address;	City;	State;	ZIP Code		\$103.45
	5015 Victor St Dallas, TX 75214-	•	olalo,	211 0000		
9. Dringing occur	pation / Job title (See Instructions	-		Q Emplo	yer (See Instructions)	mint many and a state of
Attorney	adion) non ina (see instructions	2)		Li .	alAtlantic Title Group	

SCHEDULE A1

The Ins	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: not available	
2. FILER NAME Alex Enriquez				3. Filer ID (Ethics Commission I	ilers)
4. Date	Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/27/2020	Christina Trotter				\$103.45
	6. Contributor address;	City; State;	ZIP Code		
	5108 Tremont St Dallas, TX 75214-	-5319			
8. Principal occup Consultant	pation / Job title (See instructions)			yer (See Instructions) of Employed	
4. Date	5. Full name of contributor	out-of-stele PAC		7. Amount of contribution (\$)	The state of the s
02/20/2020	Bm Turner				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	6312 Chesley Ln Dallas, TX 75214	-2119			
8. Principal occup Retired	pation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/09/2020	Dm Turner				\$200.00
	6. Contributor address;	City; State;	ZIP Code		
	6312 Chesley Ln Dallas, TX 75214	-2119		*C	
8. Principal occup Retired	pation / Job title (See Instructions)		9 Employ	yer (See Instructions)	S
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/19/2020	Brian Walker			-	\$1,032.70
	6. Contributor address;	City; State;	ZIP Code		
	6840 Southridge Dr Dallas, TX 752	14-3161			
8. Principal occup Consultant	pation / Job title (See Instructions)			yer (See Instructions) nergy Edge	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/27/2020	Penny Welsh				\$26.01
	6. Contributor address;	City; State;	ZIP Code		
	360 W 43rd St Apt N7B New York	, NY 10036-6463			
	pation / Job title (See Instructions)			yer (See Instructions)	11
Business			L.	iveRamp	

SCHEDULE A1

The Instruction Guide explains how to complete this form.				Total pages Schedule A1: not available		
2. FILER NAME Alex Enriquez					3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-a	tate PAC		7. Amount of contribution (\$)	
02/11/2020	David Whitley					\$258.32
	6. Contributor address;	City:	State;	ZIP Code		
	718 Nesbitt Dr Dallas, TX 75214	-4442				
8. Principal occup Self Employe	pation / Job title (See Instructioned	ıs)			yer (See Instructions) elf Employed	
4. Date	5. Full name of contributor	aut-of-s	late PAC		7. Amount of contribution (\$)	
02/19/2020	Amy Wilk					\$51.83
	6. Contributor address;	City;	State;	ZIP Code	İ	
	6363 Mercedes Ave Dallas, TX 7	5214-3007				
	pation / Job title (See Instruction	is)			yer (See Instructions)	
Social Works	5. Full name of contributor			N	7. Amount of contribution (\$)	
4. Date		out-of-s	late PAC		7. Amount of continuation (\$)	
02/19/2020	Amy Wilk					\$51.83
	6. Contributor address;	City;	State;	ZIP Code		
	6363 Mercedes Ave Dallas, TX 7					
8. Principal occup Social Works	pation / Job title (See Instruction er	ns) 			yer (See Instructions) IA	
4. Date	5. Full name of contributor	out-of-e	state PAC		7. Amount of contribution (\$)	
02/19/2020	Chris Wilroy					\$1,548.95
	6. Contributor address;	City;	State;	ZIP Code		
	6921 Delrose Dr Dallas, TX 752	14-3503				
8. Principal occur Hotel Execut	pation / Job title (See Instruction ive	18)		1	yer (See Instructions) Lilton	.*
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution (\$)	- Control of the cont
02/21/2020	Tamara Woodchek					\$103.45
	6. Contributor address;	City;	State;	ZIP Code		
	7040 Hillgreen Dr Dallas, TX 75	214-1930				
	pation / Job title (See Instruction	ns)			yer (See Instructions)	
Homemaker				U	Inemployed	

SCHEDULE A1

The Instruction Guide explains how to complete this form.				Total pages Schedule A1: not available		
2. FILER NAME Alex Enriquez					3. Filer ID (Ethics Commission Fi	lers)
4. Date	5. Full name of contributor	out-of-si	tate PAC		7. Amount of contribution (\$)	
02/10/2020	Lydia Wright					\$309.95
	6. Contributor address;	City;	State;	ZIP Code		
	5347 Miller Ave Dallas, TX 7520	6-6422				
	pation / Job title (See Instruction	s)			yer (See Instructions)	
Owner				L	akewood Veterinary Center	
4. Date	5. Full name of contributor	out-of-e	tale PAC		7. Amount of contribution (\$)	
02/10/2020	Lydia Wright					\$200.00
	6. Contributor address;	City;	State;	ZIP Code		
	5347 Miller Ave Dallas, TX 7520	6-6422				
8. Principal occur	pation / Job title (See Instruction	s)		1 24	yer (See Instructions)	
Owner				L	akewood Veterinary Center	
4. Date	5. Full name of contributor	out-of-s	late PAC		7. Amount of contribution (\$)	
06/29/2020	Lydia Wright					\$103.45
	6. Contributor address;	Clty;	State;	ZIP Code		
	5347 Miller Ave Dallas, TX 7520	6-6422				
8. Principal occup	pation / Job title (See Instruction	s)		9 Employ	yer (See Instructions)	
Owner	and the second of the second o	HIS.		L	akewood Veterinary Center	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of contribution (\$)	
02/10/2020	Stephan Zane					\$20.00
	6. Contributor address;	City;	State;	ZIP Code		
	6614 Sunnyland Ln Dallas, TX 7	5214-3125				
	pation / Job title (See Instruction	s)			yer (See Instructions)	
Attorney				A	andrews Kurth, LLP	

	EXPENDIT	TURE CATEGORIES I	FOR BOX 8((a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorlals Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac	et Labor -	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Credit Card Payment	The Instruction Gul	de explains how to cor	nplete this fo	orm.
Total pages Schedule F1:	2. FILER NAME Alex Enriquez		3. File	r ID (Ethics Commission Filers)
4 Date	5 Payee name			
03/10/2020	2020 Friends of Lakewood Go			
6 Amount	7 Payee address;	City;	State:	ZIp Code
\$1,040.58	Dallas, TX 75214			
8	(a) Category (See categories listed	l at the top of this schedule)	(b) Descrip	lion
PURPOSE OF	Advertising Expense		Sponsorship	
EXPENDITURE	Check if travel outside of Texas, co			lf Austin, TX, afficeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			
03/10/2020	2nd Annual Friends of Lakewo			
6 Amount \$1,000.00	7 Payee address;	City;	State:	ZIp Code
\$1,000.00	Dallas, TX 75214			
8 BURDOSE	(a) Category (See categories listed	i at the top of this schedule)	(b) Descrip	tion
PURPOSE OF	Advertising Expense		Sponsorship	
EXPENDITURE	Check if travel outside of Texas, or	amalaia Sabadula T	Chack	if Austin, TX, officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder name		Office sought	
expenditure to benefit C/OH	Canadator Cincoriolaci Hamo		- mod drug.n	
4 Date	5 Payee name	*************************************		. California de la companya de la co
02/19/2020	Advocate Publishing			
6 Amount	7 Payee address;	City;	State:	Zlp Code
\$1,369.00				
	6301 Gaston Ave Ste 820 Dall	as, TX 75214-6291		
8 PURPOSE	(a) Category (See categories listed	d at the top of this schedule)	(b) Descrip	
OF	Advertising Expense		Advertising	
EXPENDITURE	Check if travel outside of Texas, co	omplete Schodute T	Chack	if Austin, TX, officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder name		Office sought	
expenditure to benefit C/OH			u uuugiit	- CHING HAM
	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE AS	NEEDED

	EXPENDITUR	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Fees Poll	ce Overhead/Rental Ing Expense ting Expense arles/Wages/Contract Lab	Transportation is Expense or Travel in Distric Travel Out of Di				
Credit Card Payment	The Instruction Guide e	xplains how to complet	,	,			
1. Total pages Schedule F1:	2. FILER NAME		3. Filer ID (Ethics C	ommission Filers)			
	Alex Enriquez						
4 Date	5 Payee name						
06/12/2020	Advocate Publishing						
6 Amount	7 Payee address;	City;	State:	Zlp Code			
\$2,000.00	6301 Gaston Ave Ste 820 Dallas, T	X 75214-6291					
8	(a) Category (See categories listed at the	top of this schedule) (b)	Description				
PURPOSE	Advertising Expense		vertising				
EXPENDITURE			_				
	Check if travel outside of Texas, complete		Check if Austin, TX, office				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought	Office held			
4 Date	5 Payee name						
02/14/2020	Avant Garden						
6 Amount \$211.09	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	State:	Zip Code			
	4254 A Oak Lawn Ave Dallas, TX	75219-2312					
8	(a) Category (See categories listed at the	e top of this schedule) (b)	Description				
PURPOSE OF	Event Expense	Ev	ent				
EXPENDITURE							
O Commission Oblin Wilderliners	Check if travel outside of Texas, complete		Check if Austin, TX, office	Office held			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought	Office field			
4 Date	5 Payee name						
06/09/2020	Alexandra Brooks			111			
6 Amount	7 Payee address;	City;	State:	Zip Code			
\$300.00	D. H. 1704 deads						
	Dallas, TX 75228						
			Maria III	consumer and the second			
8 PURPOSE	(a) Category (See categories listed at the		Description				
OF	Consulting Expense	C	asulting				
EXPENDITURE	Check if travel outside of Texas, complete	le Schedule T	Check if Austin, TX, offic	ehoider living expense			
9 Complete ONLY if direct	Candidate/Officeholder name		sought	Office held			
expenditure to benefit C/OH		3,112	- u -				
	<u> </u>						
	ATTACH ADDITIONAL COPIE	S OF THIS SCHEDU	LE AS NEEDED				

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Event Expense Office Overhead/Rental Solicitation/Fundraising Expense Accounting/Banking Fees Polling Expense Transportation Equipment & Related Consulting Expense Food/Beverage Expense Printing Expense Expense Contributions/Donations Made By Cardidate/Officeholder/Political Committee Committee The Instruction Guide explains how to complete this form.					
1. Total pages Schedule F1:	2. FILER NAME		3. Fil	er ID (Ethics Commission Filers)	
	Alex Enriquez				
4 Date	5 Payee name				
07/08/2020	Alexandra Brooks			Alexander de la companya de la comp	
6 Amount \$600.00	7 Payee address; Dallas, TX 75228	City;	State:	ZIp Code	
8	(a) Category (See categories listed a	it the top of this schedule)	(b) Descrip	otion	
PURPOSE OF	Consulting Expense	,	Consulting		
EXPENDITURE					
	Check If travel outside of Texas, com	The state of the s		k If Auslin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held	
4 Date	5 Payee name				
06/30/2020	Buffer Publishing				
6 Amount \$75,00	7 Payee address;	City;	State:	Zip Code	
\$75,00	2443 Fillmore St # 380-7163 Sa	n Francisco, CA 94115-	-1814		
8 PURPOSE	(a) Category (See categories listed a	at the top of this schedule)	(b) Descri		
OF	Advertising Expense		Social Med	lia	
EXPENDITURE	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder name		Office sough	Contract of the Contract of th	
expenditure to benefit C/OH	Candidate/Officerolder flame		Jinee eeug.		
4 Date	5 Payee name				
02/04/2020	Claire Cahoon			un un reconstitue que pentir como con	
8 Amount	7 Payee address;	City;	State:	Zip Code	
\$1,500.00	1800 N Hali St Apt 515 Dallas,	TX 75204-4170			
	1	,.			
8	(a) Category (See categories listed a	of the lon of this schedule)	(b) Descri	ption	
PURPOSE OF	Consulting Expense	at the top of this scribtule,	Consulting		
EXPENDITURE				total at the control of the control	
Q. Complete Ohli V is allocat	Check if iravel outside of Texas, con		Chec Office sough	k if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		onice sough	ic Office field	
	ATTACH ADDITIONAL COP	IES OF THIS SCHE	DULE AS	NEEDED	

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Glitt/Awards/Memorials Expense Legal Services The Instruction Guit	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contracted to explains how to contracted the explains how to contracted the explains how to contracted the explains how to contract the explains have the explains the		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)	
1. Total pages Schedule F1:	2. FILER NAME			er ID (Ethics Commission Filers)	
1. Total pages ochedule FT.	Alex Enriquez		3. 110	er ib (Ethics Commission Fliers)	
4 Date	5 Payee name				
02/18/2020	Claire Cahoon				
6 Amount \$93.00	7 Payee address; 1800 N Hall St Apt 515 Dallas	City; TX 75204-4170	State:	Zlp Code	
8 PURPOSE OF	(a) Category (See categories listed Event Expense	at the top of this schedule)	(b) Descrip	otion ment for event supplies	
EXPENDITURE	Check If Iravel outside of Texas, co	mplete Schedule T	Check	k if Auslin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held	
4 Date	5 Payee name				
03/12/2020	Claire Cahoon				
6 Amount \$1,500.00	7 Payee address; 1800 N Hall St Apt 515 Dallas	Cily; TX 75204-4170	State:	ZIp Code	
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion	
PURPOSE OF	Consulting Expense		Consulting		
EXPENDITURE			<u> </u>	The second secon	
	Check if travel outside of Texas, co	mplete Schedule T	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held	
4 Date	5 Payee name				
05/11/2020	Claire Cahoon				
6 Amount \$3,000.00	7 Payee address; 1800 N Hall St Apt 515 Dallas	Clty; , TX 75204-4170	State;	Zip Code	
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip		
OF	Consulting Expense		Consulting		
EXPENDITURE	Check if travel outside of Texas, co	mplete Schedule T	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY If direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held	
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE AS	NEEDED	

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Office Overhead/I Fees Polling Expense Food/Beverage Expense Printing Expense Gift/Awards/Memorials Expense Salaries/Wages/C Legal Services The Instruction Guide explains how	Contract Labor	Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) s form.		
1. Total pages Schedule F1:	2. FILER NAME	3.	Filer ID (Ethics Commission Filers)		
rotal pagos conocato : i.	Alex Enriquez	J.,	The IS (Lines commoder there)		
4 Date	5 Payee name				
06/05/2020	Claire Cahoon				
6 Amount	7 Payee address; City;	State	: Zip Code		
\$1,500.00	1800 N Hall St Apt 515 Dallas, TX 75204-4170				
8	(a) Category (See categories lieted at the top of this sche	dule) (b) Desc	cription		
PURPOSE OF	Consulting Expense	Consult	ing		
EXPENDITURE					
	Check if travel outside of Texas, complete Schedule T	ch	eck if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sou	ght Office held		
4 Date	5 Payee name				
07/08/2020	Claire Cahoon				
6 Amount	7 Payee address; City;	State	: Zip Code		
\$1,500.00	•				
	1800 N Hall St Apt 515 Dallas, TX 75204-4170				
8	(a) Category (See categories listed at the top of this sche	dule) (b) Desc	cription		
PURPOSE OF	Consulting Expense	Consult	ing		
EXPENDITURE					
EM EMBITORE	Check If travel outside of Texas, complete Schedule T	□ct	eck if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sou	ight Office held		
4 Date	5 Payee name		And the second s		
03/10/2020	Call Time AI				
6 Amount	7 Payee address; City;	State	: Zip Code		
\$175.00	, , , , , , , , , , , , , , , , , , , ,				
,	2627 E College Ave Visalia, CA 93292-3205				
	(1) 0-15	10.55	-d-Ab		
8 PURPOSE	(a) Category (See categories lieted at the top of this school		•		
OF	Solicitation/Fundraising Expense	Fundrai	SILE		
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Пс	neck if Austin, TX, officeholder living expense		
9 Complete ONLY if direct	Candidate/Officeholder name	Office sou			
expenditure to benefit C/OH	The state of the s				
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE	AS NEEDED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense **Event Expense** Office Overhead/Rental Solicitation/Fundraising Expense Accounting/Banking Polling Expense Transportation Equipment & Related Fees Consulting Expense Expense Food/Beverage Expense Printing Expense Contributions/Donations Made By Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Travel In District Candidate/Officeholder/Political Travel Out of District Legal Services Committee Other (enter a category not listed above) Credit Card Payment The instruction Guide explains how to complete this form. 1. Total pages Schedule F1: 2. FILER NAME 3. Filer ID (Ethics Commission Filers) Alex Enriquez 4 Date 5 Payee name 04/13/2020 Call Time AI Clty; State: Zip Code 6 Amount Payee address; \$175.00 2627 E College Ave Visalia, CA 93292-3205 (b) Description 8 (a) Category (See calegories listed at the top of this schedule) **PURPOSE** Fundraising Solicitation/Fundraising Expense **OF EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office held 9 Complete ONLY If direct Office sought Candidate/Officeholder name expenditure to benefit C/OH 4 Date 5 Pavee name 05/11/2020 Call Time AI State: Zlp Code Cltv: 6 Amount 7 Payee address; \$175.00 2627 E College Ave Visalia, CA 93292-3205 (b) Description (a) Category (See categories listed at the top of this schedule) PURPOSE **Fundraising** Solicitation/Fundraising Expense OF **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Office held Office sought Candidate/Officeholder name expenditure to benefit C/OH 4 Date 5 Payee name 06/10/2020 Call Time AJ Zlp Code City; State: 6 Amount Payee address; \$175.00 2627 E College Ave Visalia, CA 93292-3205 8 (a) Category (See categories listed at the top of this achedule) (b) Description **PURPOSE** Fundraising Solicitation/Fundraising Expense OF **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check If Austin, TX, officeholder living expense Office sought Office held 9 Complete ONLY If direct Candidate/Officeholder name expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Event Expense Office Overhead/Rental Solicitation/Fundraising Expense Accounting/Banking Fees Polling Expense Transportation Equipment & Related Consulting Expense Food/Beverage Expense Printing Expense Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee The Instruction Guide explains how to complete this form.					
Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. F	iler ID (Ethics Commission Filers)		
4 Date 07/13/2020	5 Payee name Call Time AI				
6 Amount \$175.00	7 Payee address; City; 2627 E College Ave Visalia, CA 93292-320	Slate:	Zlp Code		
8 PURPOSE OF	(a) Category (See categories listed at the top of thi Solicitation/Fundraising Expense	s schedule) (b) Desci Fundraisi	·		
EXPENDITURE	Check if travel outside of Texas, complete Schedul	T Che	ck if Auslin, TX, officeholder Hving expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	ht Office held		
4 Date	5 Payee name				
06/11/2020	Canva		On the second se		
6 Amount \$12.95	7 Payee address; City; 2/2 Lacey Street Surry Hills, NSW 2-010	State:	Zlp Code		
8 PURPOSE OF	(a) Category (See categories listed at the top of the Advertising Expense	s schedule) (b) Desc Website	iption		
EXPENDITURE	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	 Candidate/Officeholder name	Office soug	ht Office held		
4 Date 07/13/2020	5 Payee name Canva				
6 Amount \$12.95	7 Payee address; City; 2/2 Lacey Street Surry Hills, NSW 2-010	State:	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed at the top of th Advertising Expense	s schedule) (b) Desc Website	ription		
EXPENDITURE	Check if travel culside of Texas, complete Schedul	eT ☐Che	ck if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sou	ht Office held		
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE A	S NEEDED		

	EXPENDITURE CATEGORIES	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense						
Total pages Schedule F1:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission Filers)				
4 Date	5 Payee name					
02/18/2020	City Newspapers					
6 Amount \$1,440.00	7 Payee address; Clty; 750 N Saint Paul St Ste 2100 Dallas, TX 75201-3214	State: Zip Code				
8 DUDDOSE	(a) Category (See categories listed at the top of this schedule					
PURPOSE OF	Advertising Expense	Advertising				
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Chack 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	5 Payee name					
03/24/2020	City Newspapers	2021U-10-10-10-10-10-10-10-10-10-10-10-10-10-				
6 Amount \$1,440.00	7 Payee address; City; 750 N Saint Paul St Ste 2100 Dallas, TX 75201-3214	State: Zip Code				
8	(a) Category (See categories listed at the top of this schedule	(b) Description				
PURPOSE	Advertising Expense	Advertising				
EXPENDITURE	Check if trevel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
4 Date	5 Payee name					
02/10/2020	Megan Doyle	The summaries and season of the season of th				
6 Amount \$172.50	7 Payee address; City; Dallas, TX 75205	State: ZIp Code				
8 PURPOSE	(a) Category (See categories listed at the top of this schedule					
OF	Consulting Expense	Consulting				
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
	ATTACH ADDITIONAL COPIES OF THIS SCI	HEDULE AS NEEDED				

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Office Overhead/Rental Solicitation/Fundraising Expense Fees Polling Expense Transportation Equipment & Related Food/Beverage Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Legal Services Travel In District Travel Out of District Other (enter a category not listed above				
Credit Card Payment	The Instruction Guide e	xplains how to complete		gery net neter aporto,	
1. Total pages Schedule F1:	2. FILER NAME		3. Filer ID (Ethics Com	mission Filers)	
	Alex Enriquez				
4 Date	5 Payee name				
03/13/2020	Megan Doyle				
6 Amount \$540.00	7 Payee address;	Olty; S	itate: Zi	p Code	
\$340.00	Dallas, TX 75205				
8	(a) Category (See categories listed at the	top of this schedule) (b) [Description		
PURPOSE OF Consulting Expense Consulting					
EXPENDITURE		-01-11-7	700-000		
9 Complete ONLY if direct	Check If travel outside of Texas, complet Candidate/Officeholder name		Check if Auslin, TX, officehol sought	Office held	
expenditure to benefit C/OH	Candidate/Onicerolder harrie	Silios	30dgin	Onico ricio	
4 Date	5 Payee name				
06/01/2020	Megan Doyle		1) 1346 444		
6 Amount	7 Payee address;	City;	tate: Z	p Code	
\$187,50	Dallas, TX 75205				
8 PURPOSE	(a) Category (See categories listed at the	10. 56	Description		
OF	Consulting Expense	Con	sulting		
EXPENDITURE	Check if travel outside of Texas, complet	e Schedule T	Check if Auslin, TX, officehol	der living expense	
9 Complete ONLY if direct	Candidate/Officeholder name	The state of the s	sought	Office held	
expenditure to benefit C/OH	Sallatato Sinosipiasi Ilaino				
4 Date	5 Payee name				
03/09/2020	EB 2020 Hillcrest High School				
6 Amount	7 Payee address;	City; S	itate: Z	p Code	
\$1,038.19					
	Dallas, TX 75230				
	7.5			TITO	
8 PURPOSE	(a) Category (See categories listed at the		Description nsorship		
OF	Advertising Expense	эрс	пвотватр		
EXPENDITURE	Check if travel outside of Texas, complet	e Schedule T	Check if Austin, TX, officehol	lder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	 Candidate/Officeholder name	Office	sought	Office held	
	ATTACH ADDITIONAL COPIES	OF THIS SCHEDUL	E AS NEEDED		

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Office Overhead Polling Expense Frond/Beverage Expense Offit/Awards/Memorials Expense Legal Services	e e /Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
	The Instruction Guide explains how		
Total pages Schedule F1:	2. FILER NAME Alex Boriquez	3. FI	ler ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/24/2020	EB Dallas Mays St Patricks Day Parade		
6 Amount \$338.15	7 Payee address; Clty;	State:	Zip Code
	Dallas, TX 75206		
8	(a) Category (See categories listed at the top of this so	hedule) (b) Descri	iption
PURPOSE OF	Advertising Expense	Sponsorsh	oip
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Chec	ck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	ht Office held
4 Date	5 Payee name		
06/30/2020	Lily Ellis		
6 Amount \$100.00	7 Payee address; City; Dallas, TX 75214	State:	Zip Code
8	(a) Category (See categories listed at the top of this so	hedule) (b) Descr	iption
PURPOSE	Advertising Expense	Mailer art	
OF EXPENDITURE	Tray or total graph and	A CONTRACTOR	The state of the s
	Check if travel outside of Texas, complete Schedule T	Che	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	ht Office held
4 Date	5 Payee name		
03/19/2020	Facebook		
6 Amount	7 Payee address; City;	State:	Zip Code
\$25.00	l Hacker Way Menlo Park, CA 94025-1456		1
PURPOSE	(a) Category (See categories listed at the top of this se Advertising Expense	chedule) (b) Descr Advertisi	
OF EXPENDITURE			
	Check if travel outside of Texas, complete Schedule T		ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	ht Office held
	ATTACH ADDITIONAL COPIES OF THI	S SCHEDULE A	S NEEDED

	EXPENDIT	URE CATEGORIES F	OR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Fees	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract	Tr Ex Labor Tr Tr	olicitation/Fundraising Expense ansportation Equipment & Related spense avel In District avel Out of District ther (enter a category not listed above)
Credit Card Payment	The Instruction Guid	le explains how to com		
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; 1 Hacker Way Menlo Park, CA	City; 94025-1456	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed of Advertising Expense	at the top of this schedule)	(b) Description Advertising	no
EXPENDITURE	Check if travel outside of Texas, con	nplete Schedule T	Check if	Auslin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	C	Office sought	Office held
4 Date 03/23/2020	5 Payee name Facebook			
6 Amount \$25.00	7 Payee address; I Hacker Way Menlo Park, CA	City; 94025-1456	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed of Advertising Expense	at the top of this schedule)	(b) Description Advertising	on
EXPENDITURE	Check if travel outside of Texas, cor	nplete Schedule T	Check If	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	C	Office sought	Office held
4 Date 03/27/2020	5 Payee name Facebook		***************************************	
6 Amount \$35.00	7 Payee address; I Hacker Way Menio Park, CA	City; 94025-1456	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed and Advertising Expense	at the top of this schedule)	(b) Description Advertising	on
EXPENDITURE	Check if Iravel outside of Texas, cor	nplete Schedule T	Check if	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
	ATTACH ADDITIONAL COP	IES OF THIS SCHE	DULE AS N	EEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac	et Labor	Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Credit Card Payment	The Instruction Gui	de explains how to cor	nplete this i	
Total pages Schedule F1:	2. FILER NAME Alex Enriquez		3. FI	er ID (Ethics Commission Filers)
4 Date	5 Payee name			
04/06/2020	Facebook			
6 Amount	7 Payee address;	City;	State:	Zlp Code
\$50.00	1 Hacker Way Menlo Park, CA	. 94025-1456		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion
PURPOSE OF Advertising Expense			Advertising	g
EXPENDITURE	Check if travel outside of Texas, co	mplete Schedule T	Checi	त् If Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
04/17/2020	Facebook			11.1
6 Amount	7 Payee address;	City;	State:	Zlp Code
\$47.90	1 Hacker Way Menlo Park, CA	. 94025-1456		
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otlon
PURPOSE OF	Advertising Exponse		Advortising	2
EXPENDITURE	Objects If heavy be extended of Towns and			I I Avetle TV officeholder living average
9 Complete ONLY if direct	Check if travel outside of Texas, co		Office sough	k If Austin, TX, officeholder living expense
expenditure to benefit C/OH	Candidate/Onicendider name		Office sough	Cinco riold
4 Date	5 Payee name			A STATE OF THE STA
05/01/2020	Facebook			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$75.00				
	I Hacker Way Menlo Park, CA	94025-1456		
			lavo	
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	
OF	Advertising Expense		Advertising	
EXPENDITURE	Check if travel outside of Texas, co	mplete Schedule T	Chec	k If Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
	ATTACH ADDITIONAL COI	TES OF THIS SCHE	EDULE AS	NEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Office Overhead/Rental Solicitation/Fundraising Expense Transportation Equipment & Related Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Legal Services Travel Out of District Travel Out of District Other (enter a category not listed above) The Instruction Guide explains how to complete this form.				
1. Total pages Schedule F1:	2. FILER NAME		ler ID (Ethics Commission Filers)		
Trotal pages contours to	Alex Enriquez				
4 Date	5 Payee name		- And The Control of		
05/18/2020	Facebook				
6 Amount	7 Payee address; City;	State:	Zlp Code		
\$4.77	1 Hacker Way Menio Park, CA 94025-1456				
8	(a) Category (See categories listed at the top of this schedule)	(b) Descr	iption		
PURPOSE OF	ng				
EXPENDITURE			h (f Austle TV stTeeledde Bules assessed		
9 Complete ONLY if direct	Candidate/Officeholder name	Office soug	ck if Auelin, TX, officeholder living expense		
expenditure to benefit C/OH	Candidate/Officeriolder Harite	Onico soug	in Onico ficia		
4 Date	5 Payee name				
05/18/2020	Facebook				
6 Amount	7 Payee address; City;	State:	Zlp Code		
\$75.00	1 Hacker Way Menlo Park, CA 94025-1456				
8	(a) Category (See categories listed at the top of this schedule)	(b) Descr	iption		
PURPOSE OF	Advertising Expense	Advertisin	ng		
EXPENDITURE					
0. 0	Check if travel outside of Texas, complete Schedule T		ck if Austin, TX, officeholder living expense ht Office held		
9 Complete ONLY If direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	III Office Held		
4 Date	5 Payee name				
05/29/2020	Facebook				
6 Amount	7 Payee address; City;	State:	Zip Code		
\$75.00					
	i Hacker Way Menio Park, CA 94025-1456				
8	(a) Category (See categories listed at the top of this schedule)	(b) Descr	Intion		
PURPOSE		Advertisin	•		
OF EXPENDITURE	Advertising Expense	J	AL THE STATE OF TH		
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Che	ck if Austin, ⊤X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	ht Office held		
	ATTACH ADDITIONAL COPIES OF THIS SCHI	EDULE A	S NEEDED		

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services			Sollcitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Credit Card Payment		de explains how to cor		The second secon
Total pages Schedule F1;	2. FILER NAME Alex Enriquez		3. Fil	er ID (Ethics Commission Filers)
4 Date 06/15/2020	5 Payee name Facebook			
6 Amount \$75.00	7 Payee address;	City;	State:	Zlp Code
\$13.00	1 Hacker Way Menlo Park, CA	94025-1456		
8 PURPOSE OF	(a) Category (See categories listed Advertising Expense	at the top of this schedule)	(b) Descri Advertisin	
EXPENDITURE	Check if travel outside of Texas, co	mplete Schedule T	Chec	k If Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	at Office held
4 Date	5 Payee name			
06/17/2020	Facebook			
6 Amount \$14.85	7 Payee address; 1 Hacker Way Menlo Park, CA	City; ⊾94025-1456	State:	ZIp Code
8 PURPOSE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)	(b) Descri	
OF EXPENDITURE	Check if travel outside of Texas, co	implete Schedule T	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	H	Office sough	nt Office held
4 Date 07/01/2020	5 Payee name Facebook			
6 Amount \$75.00	7 Payee address; 1 Hacker Way Menlo Park, CA	Gily; \ 94025-1456	State:	Zip Code
8 Purpose Of	(a) Category (See categories listed Advertising Expense	at the top of this schedule)	(b) Descri Advertisin	•
EXPENDITURE	Check if travel outside of Texas, co	omplete Schedule T	Chec	k If Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE AS	SNEEDED

	EXPENDIT	URE CATEGORIES F	OR BOX	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac		Sollcitation/Fundralsing Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
Total pages Schedule F1:	2. FILER NAME Alex Enriquez		3. Fil	er ID (Ethics Commission Filers)
4 Date 02/03/2020	5 Payee name Friends of Mata			
6 Amount \$500.00	7 Payee address; Dailas, TX 75223	City;	State:	Zip Code
PURPOSE OF	(a) Category (See categories listed Advertising Expense	at the top of this schedule)	(b) Descri Sponsorah	
EXPENDITURE	Check if travel outside of Texas, con	mplete Schedule T	Chec	k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
02/05/2020 6 Amount	Frost Bank	City;	State:	ZIp Code
\$26.00	7 Payee address; 6312 La Vista Dr Dallas, TX 75		orare.	Zip Godd
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri Check pro	
EXPENDITURE	Check if travel outside of Texas, con	mplete Schedule T	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date 04/02/2020	5 Payee name GoFundMe Maple Lawn			
6 Amount \$100.00	7 Payee address; Dallas, TX 75235	City;	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Co		(b) Descri Donation	ption
EXPENDITURE	Check if travel outside of Texas, co		Chec	k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	,	Office sough	nt Office held
	ATTACH ADDITIONAL COR	PIES OF THIS SCHE	EDULE AS	NEEDED

	EXPENDITURE CATEG	ORIES FOR BO	OX 8(a)	
Candidate/Officeholder/Political Committee	Event Expense Office Overhear Polling Expense Pond/Beverage Expense Offi/Awards/Memorlals Expense Legal Services	e se	Transportation Expense Travel In Distric Travel Out of D	
Credit Card Payment	The instruction Guide explains ho	w to complete t	his form.	
1. Total pages Schedule F1:	2. FILER NAME	3.	Filer ID (Ethics C	commission Filers)
	Alex Enriquez			
4 Date	5 Payee name			
07/02/2020	Google G Suite			
6 Amount	7 Payee address; City;	Sta	ite:	Zip Code
\$115.14	1600 Amphitheatre Pkwy Mountain View, CA	94043-1351		l
8	(a) Category (See categories listed at the top of this s	chedule) (b) De	scription	
PURPOSE	Office Overhead/Rental Expense	Email	1	
OF EXPENDITURE				
	Check if travel outside of Texas, complete Schedule T		Check if Auslin, TX, offic	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office s	ought	Office held
4 Date	5 Payee name			
03/23/2020	Greenville Avenue Pizza			
6 Amount	7 Payee address; City;	Sta	ate:	Zip Code
\$66.29	1923 Greenville Ave Dallas, TX 75206-7438			
8	(a) Category (See categories listed at the top of this s	_{chedule)} (b) De	escription	
PURPOSE	Event Expense	Event	t	
EXPENDITURE			V	
	Check if travel outside of Texas, complete Schedule T		Check if Austin, TX, office	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office s	ought	Office held
4 Date	5 Payee name			
02/04/2020	Home Depot			
6 Amount	7 Payee address; City;	Sta	ate:	Zlp Code
\$56.90	6000 Skillman St Dallas, TX 75231-7721			
8 PURPOSE	(a) Category (See categories listed at the top of this s		escription	
PURPOSE	Advertising Expense	Signa	ige	
EXPENDITURE	Check if travel outside of Texas, complete Schedule 1		Check if Austin, TX, offic	ceholder (Iving expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office s	ought	Office held
	ATTACH ADDITIONAL COPIES OF TH	S SCHEDULE	E AS NEEDED	

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac de explains how to con		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
	2. FILER NAME	de orthighte men to ben	<u> </u>	er ID (Ethics Commission Filers)
1. Total pages schedule Ft.	Alex Enriquez		J. 111	ar ID (Calica Constituesion Faiets)
4 Date	5 Payee name			
03/02/2020	Home Depot			
6 Amount \$96.41	7 Payee address;	City;	State:	Zlp Code
	6000 Skillman St Dallas, TX 7	5231-7721		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion
PURPOSE OF	Advertising Expense	,	Signage	
EXPENDITURE				
	Check if travel outside of Texas, co			k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
03/02/2020	Kendall Creative			
6 Amount \$899.98	7 Payee address;	City;	State:	Zlp Code
	17120 Dallas Pkwy Dallas, TX	75248-1144		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption
PURPOSE OF	Advertising Expense		Parapherns	lia
EXPENDITURE			<u></u>	
0.0	Check if travel outside of Texas, co	The state of the s	11111111111111111	k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
04/30/2020	Kendall Creative			
6 Amount	7 Payee address;	City;	State:	Zlp Code
\$205.59				
	17120 Dallas Pkwy Dallas, TX	75248-1144		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption
PURPOSE OF	Advertising Expense		Parapherna	ılia
EXPENDITURE	Check if travel outside of Texas, co	omplete Schedule T	Chec	k if Auslin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	DULE AS	NEEDED

	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By CandIdate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Glft/Awards/Memorials Expense Legal Services The Instruction Guit	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to cor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
	2. FILER NAME	as expidition to con		ler ID (Ethics Commission Filers)
T. Total pages Schedule PT.	Alex Enriquez		J3. Fil	er ib (Ettiles Cottimission Pilets)
4 Date 03/27/2020	5 Payee name Mayich Branding Group			7,000,000
6 Amount \$260.83	7 Payee address;	City;	State:	Zip Code
\$20 0 .83	525 Commerce St Southlake, T	X 76092-9190		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption
PURPOSE OF	Advertising Expense		Hand sanit	tizer
EXPENDITURE	Check if travel guilded of Texas, co	mplete Schedule T	Chec	k If Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
4 Date	5 Рауее пате	11 1000		
06/04/2020	Nathaniel Ogren			
6 Amount \$200,00	7 Payee address; Dallas, TX 75211	City;	State:	Zlp Code
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption
PURPOSE	Consulting Expense	,	Consulting	3
EXPENDITURE			<u> </u>	
	Check if travel outside of Texas, co			k If Austin, TX, officeholder living expense
9 Complete ONLY If direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
07/08/2020	Nathaniel Ogren			
6 Amount	7 Payee address;	City;	State:	Zlp Code
\$156.00				
	Dailas, TX 75211			
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descr	iptlon
PURPOSE OF	Consulting Expense		Consulting	-
EXPENDITURE			4	
	Check if travel outside of Texas, co			k If Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ht Office held
	ATTACH ADDITIONAL COI	PIES OF THIS SCHI	EDULE AS	S NEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Glft/Awards/Memorials Expense Legal Services			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)	
Credit Card Payment	The Instruction Gui	de explains how to con	nplete this f	orm.	
Total pages Schedule F1:	2. FILER NAME Alex Enriquez		3. File	er ID (Ethics Commission Filers)	
4 Date	5 Payee name				
02/04/2020	Paragon Solution				
6 Amount \$190.15	7 Payee address;	City;	State:	Zip Code	
	2141 E Broadway Rd Ste 202	Гетре, AZ 85282-1895			
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip		
OF	Fees		Processing	fees	
EXPENDITURE	Check if travel outside of Texas, co			k If Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held	
4 Date	5 Payee name				
03/02/2020	Paragon Solution				
6 Amount \$496.38	7 Payee address; 2141 E Broadway Rd Ste 202	City; Fempe, AZ 85282-1895	State:	Zlp Code	
8	(a) Catagoni		(h) Denesti	astan	
PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Description (b) Processing		
EXPENDITURE	_				
	Chack if travel outside of Texas, co			k if Austin, TX, officeholder living expense	
9 Complete ONLY If direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held	
4 Date	5 Payee name				
04/02/2020	Paragon Solution				
6 Amount \$146.36	7 Payee address;	City;	State:	Zlp Code	
	2141 E Broadway Rd Ste 202	Геmpe, AZ 85282-1895			
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri		
PURPOSE OF	Fees		Processing	fees	
EXPENDITURE	Check if travel putolike of Toyon as	anninta Salandula T	Chan	k if Austin. TV officeholder living eventure	
9 Complete ONLY if direct	Check if travel outside of Texas, or Candidate/Officeholder name		Office sough	k if Austin, TX, officeholder living expense Office held	
expenditure to benefit C/OH	Candidate/Onlicendider name		Omoo edugi	. Only Holy	
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE AS	NEEDED	

	EXPENDIT	URE CATEGORIES F	OR BOX 8	(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Rental Polling Expense Printing Expense Salarles/Wages/Contract de explains how to con		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Total pages Schedule F1:	2. FILER NAME Alex Enriquez		3. File	er ID (Ethics Commission Filers)
4 Date 05/04/2020	5 Payee name Paragon Solution			
6 Amount \$9.02	7 Payee address; 2141 E Broadway Rd Ste 202	City; Гетре, AZ 85282-1895	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip Processing	
9 Complete ONLY if direct expenditure to benefit C/OH	Check If travel outside of Texes, co Candidate/Officeholder name		Check	t f Austin, TX, officeholder living expense f Office held
4 Date 06/02/2020	5 Payee name Paragon Solution		Λ	
6 Amount \$2.41	7 Payee address; 2141 E Broadway Rd Ste 202	Clty; Гетре, AZ 85282-1895	State:	Zlp Code
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descript Processing	
EXPENDITURE	Check if travel outside of Texas, co	mpiele Schedule T	Chec	k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date 07/02/2020	5 Payee name Paragon Solution			
6 Amount \$73.01	7 Payee address; 2141 E Broadway Rd Ste 202	City; Гетре, AZ 85282-1895	State;	ZIp Code
8 PURPOSE OF	(a) Category (See categories listed	at the top of this schedule)	(b) Descri Processing	
EXPENDITURE	Check if travel outside of Texas, co	emplete Schedule T	Chec	k If Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ot Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE AS	NEEDED

	EXPENDITURE CATEGORIES	FOR BOX	8(a)
Candidate/Officeholder/Political Committee	Event Expense Office Overhead/Renta Fees Polling Expense Food/Beverage Expense Printing Expense Glft/Awards/Memorials Expense Salaries/Wages/Contra Legal Services		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enler a category not listed above)
Credit Card Payment	The instruction Guide explains how to co	mplete this	form.
1. Total pages Schedule F1:	2. FILER NAME	3. Fi	ler ID (Ethics Commission Filers)
	Alex Enriquez		
4 Date	5 Payee name		
02/07/2020	Pre-Geneva Association		
6 Amount	7 Payee address; City;	State:	Zlp Code
\$1,000.00	Dallas, TX 75206		
	-		
8	(a) Category (See categories listed at the top of this schedule)	(b) Descri	plion
PURPOSE	Advertising Expense	Sponsorsh	
OF EXPENDITURE		1	
	Check if travel outside of Texas, complete Schedule T	Chec	ck if Austin, TX, officeholder living ехрелзе
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	ht Office held
4 Date	5 Payee name		
01/27/2020	Signage Systems Dallas		l l
6 Amount	7 Payee address; City;	State:	Zip Code
\$389.70			
	7900 Ferguson Rd Dallas, TX 75228-6354		
8	(a) Category (See categories listed at the top of this schedule)	(b) Descr	iption
PURPOSE OF	Advertising Expense	Signage	
EXPENDITURE			
	Check if travel outside of Texas, complete Schedule T		ck If Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	ht Office held
4 Date	5 Payee name		
02/04/2020	Signage Systems Dallas		
6 Amount	7 Payee address; City;	State:	Zip Code
\$668.99			
	7900 Ferguson Rd Dallas, TX 75228-6354		
8	(a) Category (See categories listed at the top of this schedule)	(b) Descr	iption
PURPOSE	Advertising Expense	Signage	
EXPENDITURE	_		a contract management of the contract of the c
	Check if travel outside of Texas, complete Schedule T		ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	ht Office held
	<u> </u>		
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE A	S NEEDED

W	EXPENDIT	URE CATEGORIES I	FOR BOX	3(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contraction of the explains how to cor	et Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1. Total pages Schedule F1:	2. FILER NAME		3. Fi	er ID (Ethics Commission Filers)
ļ .	Alex Enriquez			
4 Date	5 Payee name			
02/27/2020	Signage Systems Dallas			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$506.61	7900 Ferguson Rd Dallas, TX	75228-6354		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption
PURPOSE OF	Advertising Expense		Signage	
EXPENDITURE	Check if travel outside of Texas, co	entata Sakadula T	Dobas	L IS Aveille. TV office-bolder Holes guesses
9 Complete ONLY if direct	Candidate/Officeholder name		Office sough	k if Austin, TX, officeholder living expense
expenditure to benefit C/OH	Oandidate/Ontonioler hains		o	5,7,55 1,5,5
4 Date	5 Payee name	1134000		
03/25/2020	Signage Systems Dallas			
6 Amount	7 Payee address;	City;	State:	Zlp Code
\$558.57	7900 Ferguson Rd Dallas, TX	75228-6354		
4				
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	plion
OF	Advertising Expense		Signage	
EXPENDITURE	Check if travel outside of Texas, co	mplete Schedule T	Chec	k if Austin, TX, afficeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder name		Office sough	
expenditure to benefit C/OH				
4 Date	5 Payee name			A STATE OF THE STA
04/14/2020	SquareSpace			
6 Amount	7 Payee address;	Clty;	State:	Zip Code
\$28.15				
	225 Varick St New York, NY 1	10014-4304		
0	7.10.1	THE SECRETARIES WAS ASSESSED.	Tax B	
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption
OF	Fees		Website	
EXPENDITURE	Check if travel outside of Texas, co	mplete Schedule T	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
	ATTACH ADDITIONAL CO.	NEO OF THE CO.		
	ATTACH ADDITIONAL COR	TIES OF THIS SCH	EDOUE AS) NEEDER

	EXPENDITUR	E CATEGORIES FOR	BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Fees Po Food/Beverage Expense Pri r Gift/Awards/Memorials Expense Sal Legal Services	ice Overhead/Rental iling Expense nting Expense laries/Wages/Contract Lab explains how to complet	Transpo Expens or Travel I Travel 0 Other (s	ion/Fundraising Expense ortation Equipment & Related e n District Out of District enler a category not listed above)
1. Total pages Schedule F1:	2. FILER NAME			thics Commission Filers)
	Alex Enriquez			
4 Date	5 Payee name			1130 NIS 130 NIS 130 NIS 110 N
05/18/2020	SquareSpace			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$28.15	225 Varick St New York, NY 100	14-4304		
8	(a) Category (See categories listed at it	ne top of this schedule) (b) I	Description	
PURPOSE OF	Pees		bsite	
EXPENDITURE			_	
0.0	Check if travel outside of Texas, compte		NAME OF TAXABLE PARTY.	TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought	Office held
4 Date	5 Payee name			
06/15/2020	SquareSpace			
6 Amount \$28.15	7 Payee address; 225 Varick St New York, NY 100		State:	Zlp Code
8	(a) Catagony is	(h)	Description	
PURPOSE	(a) Category (See categories listed at II		bsite	
OF EXPENDITURE	Fees			
EXPENDITURE	Check if travel outside of Texas, comple	ate Schedule T	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	5 Payee name			
02/18/2020	Texas Democratic Party			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$1,000.00	1106 Lavaca St Ste 100 Austin, T	X 78701-2170		
8	(a) Category (See categories listed at II	ne top of this schedule) (b)	Description	
PURPOSE OF	OTHER (enter a category not listed abo	ve) Fie	eld deta	
EXPENDITURE	Charle if travel quields of Tayen assessed	ala Cabadula T	Chook if Auntho	TV officeholder Bules overses
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		sought	, TX, officeholder living expense Office held
	ATTACH ADDITIONAL COPIE	S OF THIS SCHEDU	LE AS NEED	DED

	EXPENDIT	URE CATEGORIES F	OR BOX	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Polltical Committee	Legal Services	_		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Credit Card Payment	The Instruction Gui	de explains how to con	nplete this	form.
Total pages Schedule F1:	2. FILER NAME Alex Enriquez		3. Fil	er ID (Ethics Commission Filers)
4 Date	5 Payee name			
02/20/2020	Trophies Inc Dallas			
6 Amount \$25,87	7 Payee address;	Clty;	State:	Zip Code
	4321 Live Oak St Dallas, TX 7	5204-6716		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption
PURPOSE OF	Advertising Expense		Nametag	
EXPENDITURE	Check if Iravel outside of Texas, co	mplete Schedule T	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY If direct	Candidate/Officeholder name		Office sough	
expenditure to benefit C/OH				
4 Date	5 Payee name			
01/27/2020	Truck Yard			
6 Amount \$377.16	7 Payee address;	City;	State:	Zlp Code
	5624 Sears St Dallas, TX 7520	6-7118		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption
PURPOSE OF	Event Expense		Event	
EXPENDITURE	Check if travel outside of Texas, co	molete Schedule T	Cher	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder name		Office sough	
expenditure to benefit C/OH	Candidate/Officeriolde/ Harrie		omeo doeg,	, Onico italia
4 Date	5 Payee name			
04/02/2020	Woodrow Wilson Robotics			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$100.00				
	Dallas, TX 75214			
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption
PURPOSE OF	Contributions/Donations Made By		Donation	
EXPENDITURE	Chack if traval autolds of Tayes as			le If Austin. TV officeholder living synamo
9 Complete ONLY if direct	Check if travel outside of Texas, co		Office sough	nt Office held
expenditure to benefit C/OH	Candidate/Onceriolder name		omos sougi	V Olling Hold
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SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By

Candidate/Officeholder/Political

Committee

Credit Card Payment

Event Expense

Fees Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense

Legal Services

Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Transportation Equipment & Rela Transportation Equipment & Related

Salaries/Wages/Contract Labor

Expense

Travel In District Travel Out of District

Other (enter a category not listed above)

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

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SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donatlons Made By

Credit Card Payment

Candidate/Officeholder/Political Committee

Event Expense Fees

Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Solicitation/Fundralsing Expense Office Overhead/Rental Expense

Salaries/Wages/Contract Labor

Transportation Equipment & Related Expense

Travel In District Travel Out of District

Other (enter a category not listed above)

Total pages Schedule G:	2. FILER NAME Alex Enriquez	3. Filer ID (Ethics Commission File	ers)
4 Date 04/02/2020	5 Payee name Google G Suite		
6 Amount \$128.98 Relimbursement from political contributions intended	7 Payee address; Cily; 1600 Amphitheatre Pkwy Mountain View, CA 94043-	State; Zlp Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Email	
	Check if travel outside of Texas, complete Schedule T	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
4 Date 01/09/2020	5 Payee name Mavich Branding Group		
6 Amount \$162,35 Reimbursement from political contributions Intended	7 Payee address; City; 525 Commerce St Southlake, TX 76092-9190	State; Zlp Code	
β PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Bauner	
	(C) Check if travel autelde of Texas, complete Schedule T	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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SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By

Candidate/Officeholder/Political

Committee Credit Card Payment Event Expense

Fees Food/Beverage Expense

Legal Services

Loan Repayment/Reimbursement Sollcltation/Fundraising Expense Office Overhead/Rental Expense

Polling Expense Gift/Awards/Memorials Expense Printing Expense

Salaries/Wages/Contract Labor

Transportation Equipment & Related Expense

Travel In District Travel Out of District

Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

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 Reimbursement from political contributions intended	7 Payee address; Clty; 1101 15th St NW Ste 500 Washington, DC 20005-5006	State; Zlp Code
8 PURPOSE OF EXPENDITURE	Fees	(b) Description Organizing software
	Check if travel outside of Texas, complete Schedule T	Check If Auslin, 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 Reimbursement from political contributions intended	7 Payee address; Clty; 1101 15th St NW Ste 500 Washington, DC 20005-5006	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fecs	(b) Description Organizing software
	(C) Check if travel outside of Texas, complete Schedule T	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment

Fees Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense

Event Expense

Legal Services

Loan Repayment/Reimbursement Solicitation/Fundralsing Expense

Salaries/Wages/Contract Labor

Office Overhead/Rental Expense Transportation Equipment & Related Expense

Travel In District Travel Out of District

Other (enter a category not listed above)

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.	
8 Amount \$150.00 Reimbursement from political contributions intended	7 Payee address; Clty; 1101 15th St NW Ste 500 Washington, DC 20005-5006	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this achedule) Fees (C) Check if travel outside of Texas, complete Schedule T	(b) Description Organizing software Check if Auslin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH		Office sought Office held
4 Date 04/01/2020	5 Payee name NGP Van Inc.	
6 Amount \$150,00 Reimbursement from political contributions intended	7 Payee address; City; 1101 15th St NW Ste 500 Washington, DC 20005-5006	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Organizing software
	(C) Check if travel outside of Texas, complete Schedule T	Check If Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS:	SCHEDULE A	S NEEDED
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SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political

Committee Credit Card Payment **Event Expense** Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Printing Expense Legal Services

Loan Repayment/Reimbursement Solicitation/Fundraising Expense Polling Expense

Salaries/Wages/Contract Labor

Office Overhead/Rental Expense Transportation Equipment & Related Expense

Travel In District Travel Out of District

Other (enter a category not listed above)

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 Relimbursement from political contributions intended	7 Payee address; Clty; 1101 15th St NW Ste 500 Washington, DC 20005-500	State; Zlp Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Organizing Software
	(C) Check if travel outside of Texas, complete Schedule T	Check if Auslin, 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 Reimbursement from political contributions intended	7 Payee address; City: 1101 15th St NW Ste 500 Washington, DC 20005-500	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Organizing software
	(C) Check if travel outside of Texas, complete Schedule T	Check If Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political

Fees Food/Beverage Expense Glft/Awards/Memorials Expense Legal Services

Event Expense

Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Transportation Equipment & Related Polling Expense Printing Expense

Expense Travel In District

Travel Out of District Salaries/Wages/Contract Labor

Other (enter a category not listed above)

Committee Credit Card Payment

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

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SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By

Candidate/Officeholder/Political

Committee Credit Card Payment Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense

Legal Services

Loan Repayment/Reimbursement Sollcitation/Fundraising Expense Office Overhead/Rental Expense Transportation Equipment & Related Polling Expense

Printing Expense

Salaries/Wages/Contract Labor

Expense

Travel In District Travel Out of District

Other (enter a category not listed above)

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 Reimbursement from political contributions intended	7 Payee address; 4321 Live Oak St Dallas	City; , TX 75204-6716	State;	ZIp Code
B PURPOSE OF EXPENDITURE	Advertising Expense	as listed at the top of this schedule) Fexas, complete Schedule T	Campaign paraphernal	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder n		Office sought	, officeholder living expense Office held