

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 13		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Leah	MI	OFFICE USE ONLY	
	NICKNAME	LAST Dunn	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	Date Hand-delivered or Date Postmarked JAN 14 2019	
	2600 W 7th St #1529 Fort Worth, TX 76107			Receipt # CITY OF FORT WORTH CITY SECRETARY	
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Paul	MI		
	NICKNAME	LAST Crabtree	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	
	150 Industrial Ave Ste 201 Azle, TX 76020			STATE; ZIP CODE	
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
		817-975-0860			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)				
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month	Day	Year	Month	
	07/01/2018			12/31/2018	
10 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
			05/04/2019	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)		
			Fort Worth City Council District 9		

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

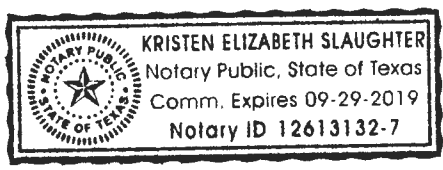
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13 C / OH NAME Dunn, Leah	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

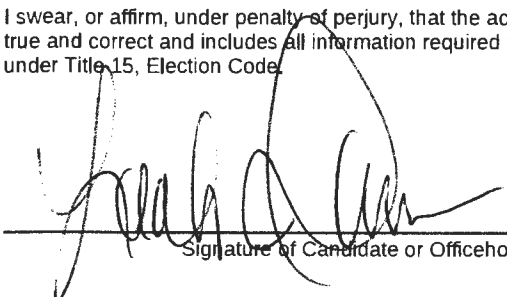
16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	3,000.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	54.60
	4.	TOTAL POLITICAL EXPENDITURES	\$	8,280.91
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	2,069.09
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	7,350.00

17 AFFADAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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



 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Leah Dunn, this the 14 day of January, 2019, to certify which, witness my hand and seal of office.

Kristen Slaughter
Signature of officer administering

Kristen Slaughter
Printed name of officer administering

operation manager
Title of officer administering oath

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

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18 FILER NAME Dunn, Leah	19 Filer ID
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,000.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 7,350.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 8,280.91
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/4 Rpt: 4/13
2 FILER NAME Dunn, Leah		3 Filer ID
4 Date 10/11/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bettinger, Doug <hr/> 6 Contributor address; City; State; Zip Code 2806 Wildcreek Ct Keller, TX 76248	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonilla, Eva <hr/> Contributor address; City; State; Zip Code 362 Foch St Fort Worth, TX 76107	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruner, Michael <hr/> Contributor address; City; State; Zip Code 2401 W 7th St #309 Fort Worth, TX 76107	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bullock, Cassie <hr/> Contributor address; City; State; Zip Code 1805 Cheryl Ct Arlington, TX 76013	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cargile, Keith <hr/> Contributor address; City; State; Zip Code 408 Westbury Ct Arlington, TX 76013	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 5/13
2 FILER NAME Dunn, Leah		3 Filer ID
4 Date 11/13/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeMoss, Margaret	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code 2600 W 7th St #2644 Fort Worth, TX 76107	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillman, Rich	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code 1312 Fairmount Ave Fort Worth, TX 76107	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holderby, Max	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code 2401 W 7th St #307 Fort Worth, TX 76107	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunsford, Perry	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 8505 Castle Ct Fort Worth, TX 76179	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madewell, Tracy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 6401 Tucker Dr Weatherford, TX 76085	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/13
2 FILER NAME Dunn, Leah		3 Filer ID
4 Date 10/11/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDade, Joan	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 2600 W 7th St #1523 Fort Worth, TX 76107		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Joyce	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1402 S Cage Blvd #258 Pharr, TX 78577		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newberry, O.P.	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 120 Hazelwood Fort Worth, TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/19/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Jessica	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1629 Anchor Way Azle, TX 76020		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purtzer, Tiffany	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 5400 Sam Callaway Rd River Oaks, TX 76114		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 7/13
2 FILER NAME Dunn, Leah		3 Filer ID
4 Date 09/14/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Alison	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 5017 Racquet Club Dr Arlington, TX 76017		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/2 Rpt: 8/13
2 FILER NAME Dunn, Leah		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 08/24/2018	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Leah	9 Loan Amount (\$) \$100.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 2600 W 7th St #1529 Fort Worth, TX 76107	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)
Date of loan 08/28/2018	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Leah	Loan Amount (\$) \$1,000.00
Is lender a financial institution? No	Lender address; City; State; Zip Code 2600 W 7th St #1529 Fort Worth, TX 76107	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 2/2 Rpt: 9/13
2 FILER NAME Dunn, Leah		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 10/03/2018	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Leah	9 Loan Amount (\$) \$6,250.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 2600 W 7th St #1529 Fort Worth, TX 76107	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor <hr/> 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/4 Rpt: 10/13	2 FILER NAME Dunn, Leah	3 Filer ID
4 Date 09/12/2018	5 Payee name Alphagraphics	
6 Amount (\$) \$125.00	7 Payee address; City; State; Zip Code 5836 Camp Bowie Blvd Fort Worth, TX 76107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing services for campaign donation envelopes and other
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2018	Payee name Alphagraphics	
Amount (\$) \$134.10	Payee address; City; State; Zip Code 5836 Camp Bowie Blvd Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing services for campaign donation envelopes and other.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/30/2018	Payee name Campaign Partner	
Amount (\$) \$49.00	Payee address; City; State; Zip Code PO Box 118 Still River, MA 01467	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign website design and maintenance.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/4 Rpt: 11/13	2 FILER NAME Dunn, Leah	3 Filer ID
4 Date 10/01/2018	5 Payee name Campaign Partner	
6 Amount (\$) \$49.00	7 Payee address; City; State; Zip Code PO Box 118 Still River, MA 01467	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign website design and maintenance.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2018	Payee name Campaign Partner	
Amount (\$) \$49.00	Payee address; City; State; Zip Code PO Box 118 Still River, MA 01467	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign website design and maintenance.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2018	Payee name Campaign Partner	
Amount (\$) \$49.00	Payee address; City; State; Zip Code PO Box 118 Still River, MA 01467	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign website design and maintenance.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/4 Rpt: 12/13	2 FILER NAME Dunn, Leah	3 Filer ID
4 Date 12/31/2018	5 Payee name Campaign Partner	
6 Amount (\$) \$49.00	7 Payee address; City; State; Zip Code PO Box 118 Still River, MA 01467	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign website design and maintenance.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/03/2018	Payee name Raymond Turco & Associates	
Amount (\$) \$6,250.00	Payee address; City; State; Zip Code 6729 Meadowcrest Dr Arlington, TX 76002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2018	Payee name Style House Media	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 3700 Cole Ave #345 Dallas, TX 75204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Marketing Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/4 Rpt: 13/13	2 FILER NAME Dunn, Leah	3 Filer ID
4 Date 09/24/2018	5 Payee name Target	
6 Amount (\$) \$189.49	7 Payee address; City; State; Zip Code 301 Carroll St Fort Worth, TX 76107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for fundraising event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2018	Payee name USPO	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 3101 W 6th St Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage stamps
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2018	Payee name Vistaprint	
Amount (\$) \$232.72	Payee address; City; State; Zip Code 95 Hayden Ave Lexington, MA 02421	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held