CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TX

FORM C/OH COVER SHEET PG 1

		FT. WORTH, TX	OOVER OHEEL TO I
The C/OH Instruction	n Guide explains how to complete this form.	1 Filer ID	2 Total pages filed: 33
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Betsy	MI	OFFICE USE ONLY Date Received
	NICKNAME LAST Price	SUFFIX	RECEIVED RECEIVED RECEIVED Date Fland-delivered or parallologinated
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CIT PO Box 100066	Y; ZIP CODE	Date Fland-delivered or Date Position Receipt # Amount
Change of Address	Fort Worth, TX 76185		Date Processed . Date Imaged
5 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Alice	MI	
	NICKNAME LAST Puente	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 2737 Calder Ct Fort Worth, TX 76107	APT / SUITE #; CITY;	STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER E 817-207-8643	XTENSION	
8 REPORT TYPE	January 15 30th day before of X July 15 8th day before el		15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year 04/25/2019 THF	Month Day ROUGH 06/30/2019	Year
10 ELECTION		ELECTION TYPE mary Runoff neral Special	Other
11 OFFICE	OFFICE HELD (if any) Mayor of Fort Worth	12 OFFICE SOUGHT (i Mayor of Fort Wor	-
	GO TC	D PAGE 2	

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH COVER SHEET PG 2

SUPPORT	& TOTALS		COVE	R SHEET PG 2 2 of 33
13 C / OH NAME	Price, Betsy] 3	L4 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	pox is for notice of political contributions accepted or political expenditures made by political date / officeholder. These expenditures may have been made without the candidate's or officent. Candidates and officeholders are required to report this information only if they receive not multiple committee. MMITTEE TYPE GENERAL COMMITTEE NAME Texas Association of REALTORS Political Action Committee COMMITTEE ADDRESS 1115 San Jacinto Blvd., Ste. 200 Austin, TX 78701 COMMITTEE CAMPAIGN TREASURER NAME Spangler, Deborah COMMITTEE CAMPAIGN TREASURER ADDRESS PO Box 2246 Austin, TX 78768 TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) TOTAL POLITICAL EXPENDITURES TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD I swear, or affirm, under penalty of perjury, that the acc true and correct and includes all information required to under Title 15, Election Code. I swear, or affirm, under penalty of perjury, that the acc true and correct and includes all information required to under Title 15, Election Code.		holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Texas Association of REALTORS Political Act	ion Committee	
		COMMITTEE ADDRESS		
	SPECIFIC	1115 San Jacinto Blvd., Ste. 200		
		Austin, TX 78701		
		There are the second of the se		
		Spangler, Deborah		
			;	
		PO Box 2246		
16 CONTRIBUTION TOTALS			IAN PLEDGES,	\$ 35.00
				\$ 36,710.00
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLESS IT	EMIZED	\$ 1,215.10
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 99,614.54
CONTRIBUTION BALANCE			ST DAY OF THE	\$ 307,244.10
OUTSTANDING LOAN TOTALS			F THE LAST DAY	\$ 0.00
17 AFFADAVIT				
	NISHA N. BREWER JONES tary Public, State of Texa mm. Expires 05-27-2020 Notary ID 130680351	true and correct and includes all in under Title 15, Election Code.		

SUBTOTALS - C/OH

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

				-	3 of 33
	LER NAM				
	HEDUL AME OF		SUBTOTAL AMOUNT		
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	34,885.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	1,825.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	99,591.22
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	23.32
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS C	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ins :	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS R TO FILER	ETURNED	\$	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/8 Rpt: 4/33 FILER NAME 3 Filer ID Price, Betsy Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/06/2019 Ahlberg, Trevor L. \$2,500.00 Contributor address; City; State; Zip Code 4725 Windsor Ridge Drive Irving, TX 75038 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/02/2019 Aldrich, Steven \$200.00 Contributor address; City; State; Zip Code 4001 Greenbriar Dr Dallas, TX 75226 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/02/2019 \$500.00 Augur, Marilyn Contributor address; City; State; Zip Code 3535 Gillespie St #105 Dallas, TX 76219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 04/29/2019 Balda, Fred (Mr.) \$500.00 Contributor address; City; State; Zip Code 6023 Waggoner Drive Dallas, TX 75230 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/25/2019 Barnes, Bradford \$1,000.00 Contributor address; City; State; Zip Code 4450 Harley Avenue Fort Worth, TX 76107 Employer (See Instructions) Principal occupation / Job title (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/8 Rpt: 5/33 FILER NAME Filer ID Price, Betsy Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/02/2019 Beecherl, Ernest (Mr.) \$500.00 6 Contributor address; City; State; Zip Code 3801 Beverly Drive Dallas, TX 75205 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 05/02/2019 Bishop, Stephen \$250.00 Contributor address; City; State; Zip Code 2912 Amherst Dallas, TX 75225 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/06/2019 \$500.00 Brayshaw, Leana Contributor address; City; State; Zip Code 4300 Shenandoah Ave Dallas, TX 76205 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 05/02/2019 Brosseau Jr., Charles \$100.00 Contributor address; City; State; Zip Code 2735 Simondale Drive Fort Worth, TX 76109 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/02/2019 \$1,000.00 Burton, William (Mr.) Contributor address; City; State; Zip Code 5 Westover Road Fort Worth, TX 76107 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/8 Rpt: 6/33 3 Filer ID 2 FILER NAME Price, Betsy out-of-state PAC (ID#: 7 Amount of Contribution (\$) Date 5 Full name of contributor \$250.00 05/02/2019 Campbell, Charlie William (Mr.) 6 Contributor address; City; State; Zip Code 5600 Lakeside Drive Fort Worth, TX 76197 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$1,000.00 05/02/2019 Community Leaders of America Contributor address; City; State; Zip Code PO Box 40175 Washington, DC 20016 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$200.00 05/02/2019 Creme, Anthony (Mr.) Contributor address; City; State; Zip Code 5160 Peach Willow Lane Fort Worth, TX 76109 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#: Full name of contributor Amount of Contribution (\$) Date 05/02/2019 \$1,000.00 Davis III, John F. Contributor address; City; State; Zip Code 11020 Tibbs Street Dallas, TX 75230 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:_ Date \$100.00 05/16/2019 Demoss, Margaret (Ms.) Contributor address; City; State; Zip Code 2600 W 7th Street #2644 Fort Worth, TX 76107 Employer (See Instructions) Principal occupation / Job title (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/8 Rpt: 7/33 3 Filer ID FILER NAME Price, Betsy Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$500.00 04/26/2019 Gachman, Arnold Contributor address; City; State; Zip Code 1229 Shady Oaks Lane Fort Worth, TX 76107 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,000.00 05/06/2019 Gibbs, Judith (Mrs.) Contributor address; City; State; Zip Code 3514 Caruth Blvd. Dallas, TX 75225 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: \$1,000.00 04/26/2019 Hallam, John (Mr.) Contributor address; City; State; Zip Code 4204 Edmondson Avenue Dallas, TX 75205 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$1,500.00 05/02/2019 Hammer & Nails PAC Contributor address; City; State; Zip Code 100 E. 15th St., Ste. 600 Fort Worth, TX 76102 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$500.00 04/29/2019 Hunt, Bruce (Mr.) Contributor address; City; State; Zip Code 3820 Potomac Avenue Dallas, TX 75205 Employer (See Instructions) Principal occupation / Job title (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/8 Rpt: 8/33 3 Filer ID FILER NAME Price, Betsy Amount of Contribution (\$) 5 Full name of contributor Date out-of-state PAC (ID#: \$250.00 05/02/2019 Kinnear, Timothy Contributor address; City; State; Zip Code 4595 Haverford Drive Frisco, TX 75034 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 05/02/2019 Kleuser, Tom (Dr.) Contributor address; City; State; Zip Code 7012 Tumbling Trail Fort Worth, TX 76116 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:_ Date \$2,500.00 04/26/2019 LeBlanc, Richard (Mr.) Contributor address; City; State; Zip Code 3001 Knox Street, Suite 207 Dallas, TX 75205 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$5,000.00 05/04/2019 Lyden, Peter (Mr.) Contributor address; City; State; Zip Code PO box 33463 Fort Worth, TX 76162 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$250.00 05/02/2019 Mason Family Trust Contributor address; City; State; Zip Code 7619 Marquette Dallas, TX 75225 Employer (See Instructions) Principal occupation / Job title (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/8 Rpt: 9/33 Filer ID FILER NAME Price, Betsy out-of-state PAC (ID#: 7 Amount of Contribution (\$) Date 5 Full name of contributor \$500.00 05/03/2019 McCullough, P. Mike (Mr.) 6 Contributor address; City; State; Zip Code 3552 Centenary Drive Dallas, TX 75225 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$1,000.00 05/06/2019 Miller, Geraldine (Ms.) Contributor address; City; State; Zip Code 4 Lakeside Park Dallas, TX 75225 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$100.00 05/02/2019 Moss, Doyle (The Honorable) Contributor address; City; State; Zip Code 128 White Trail Willow Park, TX 76008 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$100.00 04/30/2019 Paniagua, Joe (Mr.) Contributor address; City; State; Zip Code 8125 Mount Shasta Circle Fort Worth, TX 76137 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor \$250.00 05/02/2019 Peterman, Whit (Mr.) Contributor address; City; State; Zip Code 6627 Starling Circle Dallas, TX 75209 Employer (See Instructions) Principal occupation / Job title (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/8 Rpt: 10/33 FILER NAME 3 Filer ID Price, Betsy Date Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 04/29/2019 Pipes, Kasey (Mr.) \$500.00 6 Contributor address; City; State; Zip Code 3700 Country Club Circle Fort Worth, TX 76109 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 05/02/2019 Political Action Committee of Winstead PC \$2,500.00 Contributor address; City; State; Zip Code 500 Winstead Building 2728 N. Harwood St. Dallas, TX 75201 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 05/02/2019 Powell, Victoria \$200.00 Contributor address; City; State; Zip Code 5820 Forest Bend Place Fort Worth, TX 76112 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 05/02/2019 Reid, Donald W. \$250.00 Contributor address; City; State; Zip Code 2000 Brook Hill Court Keller, TX 76248 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 05/06/2019 Ryan Texas PAC \$5,000.00 Contributor address; City; State; Zip Code Three Galleria Tower, 13155 Noel Rd #100 Dallas, TX 75240 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/8 Rpt: 11/33 FILER NAME 3 Filer ID Price, Betsy Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 05/03/2019 Schaefer, Ken (Mr.) \$500.00 Contributor address; City; State; Zip Code 2705 Manorwood Trail Fort Worth, TX 76109 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: \$500.00 04/26/2019 Small, Terrell Contributor address; City; State; Zip Code 3920 Monticello Drive Fort Worth, TX 76107 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date 04/25/2019 \$250.00 Sweet, Mike (Mr.) Contributor address; City; State; Zip Code 3522 Caruth Boulevard Dallas, TX 75225 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: \$1,000.00 05/03/2019 Vennam, Murali (Mr.) Contributor address; City; State; Zip Code 6851 Lahontan Dr. Fort Worth, TX 76132 Employer (See Instructions) Principal occupation / Job title (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 12/33				
Price, Betsy	3 Filer ID				
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	\$				
Date 04/30/2019 6 Full name of contributor out-of-state PAC (ID#:) Sip Dine Design LLC 7 Contributor address; City; State; Zip Code 6309 Monroe Rd Fort Worth, TX 76116	8 Amount of contribution (\$) In-kind contribution description \$1,825.00 Social Media Advertising				
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL)	I-JUDICIAL) (See instructions)				
2 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title	title (FOR JUDICIAL) (See instructions)				
4 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor	or's spouse (if any) (FOR JUDICIAL)				
6 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	al Committee Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Git/Awards/Memorials Expense Printing Expense						
		10W to complete this form.						
1 Total pages Schedule F1: Sch: 1/20 Rpt: 13/33	2 FILER NAME Price, Betsy							
4 Date	5 Payee name							
06/25/2019	ASSOCIATED REPUBLICANS OF TEX	KAS						
6 Amount (\$) \$250.00	7 Payee address; City; State; 807 N BRAZOS ST STE 601 AUSTIN, TX 78701	Zip Code						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this school Contributions/Donations Made By Candidate/Officeholder/Political Commi	Check if travel	outside of Texas. Complete Schedule T. , TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/O		ffice sought	Office held					
Date	Payee name							
05/08/2019	ATCHLEY & ASSOCIATES LLP							
Amount (\$) \$3,591.00	Payee address; City; State; 1005 LA POSADA DRIVE	Zip Code						
	AUSTIN, TX 78752							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Accounting/Banking	Check if travel of Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense ACCOUNTING AND REPORTING					
Complete ONLY if direct expenditure to benefit C/O		ffice sought	Office held					
Date	Payee name							
06/05/2019	ATCHLEY & ASSOCIATES LLP							
Amount (\$) \$1,731.50	Payee address; City; State; 1005 LA POSADA DRIVE	Zip Code						
	AUSTIN, TX 78752							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Accounting/Banking	Check if travel of Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense ACCOUNTING AND REPORTING					
Complete ONLY if direct expenditure to benefit C/OI		fice sought	Office held					

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Fees Food/Beverage Expense
Gift/Awards/Memorials Expense

Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide ex		-	es/Contract Labor lete this form.	•	OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME					3 F	Filer ID	
	Sch: 2/20 Rpt: 14/33	Price, Betsy							
4	Date	5 Payee name							
	06/08/2019	AUSTRALIA	N WAY /SYDNEY IN	TERNATION	IAL	AIRPORT			
6	Amount (\$)	7 Payee addres		State; Zip C	ode				
	\$170.41	11 SYDNEY	INTERNATIONAL T	ERMINAL					
		SYDNEY ZZ	NSW2020 Australia		_				
8	PURPOSE OF		e Categories listed at the top of	this schedule)	(b)	Description		of Town Complete Cabadula T	
	EXPENDITURE	Gift/Awards/	Memorials Expense			-		e of Texas. Complete Schedule T. fficeholder living expense	
						CONSTITUE			
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Offic	eholder name	Office sou	ught		***************************************	Office held	
	- CAPONIANA TO SOME OF C								
	Date	Payee name))
	05/13/2019	B&B BUTCH	ERS						
	Amount (\$)	Payee address	s; City;	State; Zip Co	ode				
	\$336.64	5212 MARA	THON AVE						
		FORT WOR	ГН, ТХ 76109						
	PURPOSE	(a) Category (See	Categories listed at the top of	his schedule)	(b)	Description			
	OF EXPENDITURE	Food/Bevera	ge Expense					of Texas. Complete Schedule T. ficeholder living expense	
						-		R DINNER WITH CONSTITUEN	JTS
						51110mm.			
-	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	L ight		-	Office held	
	expenditure to benefit C/OI				0				
	Date	Payee name							
	06/01/2019	,	IT MANAGEMENT C	OMPANY					
				State; Zip Co	odo		-		
	Amount (\$) \$2,049.96	Payee address	s;	State, Zip Co	ue				
	\$2,049.90	3000 TORTE	E CREEK BLVD						
		DALLAS, TX	75219						
-	PURPOSE				(h)	Description			
	OF	Event Expen	Categories listed at the top of t	his schedule)	(~)		utside	of Texas. Complete Schedule T.	
	EXPENDITURE	Event Expen	50			Check if Austin,	TX, off	ficeholder living expense	
							OR (CAMPAIGN FUNDRAISING	
						EVENT			
	Complete ONLY if direct	Candidate/Office	eholder name	Office sou	ght			Office held	
	expenditure to benefit C/OF				-				
						rand 3			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a cotogon pet listed chara)

	Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	By - cal Co	mmittee	Gift/Awards/Memori Legal Services The Instruction			Wage	es/Contract Labor		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	12	EII ED NAME						3	Filer ID
-	Sch: 3/20 Rpt: 15/33	-	Price, Betsy						٦	THE ID
L		1			nation of the second		-		<u> </u>	
4	Date	5	Payee name							
	04/29/2019		CHARLES 7	TON'S FORT V	VORTH					
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	ode			
	\$244.33		3020 SOUT	H HULEN						
		1								
		1	CODT MOD	TU TV 76100	`					
		_		RTH, TX 76109						
8	PURPOSE OF	(a)	Category (Se	ee Categories listed a	t the top of this sch	nedule)	(b)	Description		
	EXPENDITURE	1	Food/Bever	age Expense				-		le of Texas. Complete Schedule T.
								l-cal		officeholder living expense
								CITY STAFF	ME	AL
				·						
	Complete ONLY if direct		Candidate/Offi	ceholder name	(Office sou	ight			Office held
	expenditure to benefit C/O	Н								
	Date	Ī	Payee name							
	05/16/2019	1	•	ON'S FORT V	/ORTH					
_						7:- 0-	-1-	acedenia management de la companya d	-	
	Amount (\$)	ı	Payee addres		State	; Zip Co	ae			
	\$182.48		3020 SOUT	H HULEN						
			FORT WOR	TH, TX 76109						
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	edule)	(b)	Description		
	OF			age Expense	the top of this soft	cuuic)	• •		utside	e of Texas. Complete Schedule T.
	EXPENDITURE							Check if Austin,	TX, o	fficeholder living expense
								CITY STAFF	ME	AL
*******	Complete ONLY if direct	С	andidate/Offic	eholder name	C	Office soug	ght	******************		Office held
	expenditure to benefit C/OF	4					-			
	D-1-									
	Date		Payee name	DT 14/0DT11						
-	05/08/2019		CITY OF FO	RT WORTH						
2	Amount (\$)	- 1	Payee addres	s; City;	State;	Zip Cod	de			
	\$285.94		200 TEXAS	ST						
		,	ORT WOR	TH, TX 76102						
-									-	
	PURPOSE OF			e Categories listed at	the top of this sche	edule)	(b)	Description		
	EXPENDITURE	F	-ees							of Texas. Complete Schedule T.
										ficeholder living expense OF OFFICEHOLDER CAMPAIGN
										1/28/2019-5/4/2019
			11.1							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		andidate/Offic	eholder name	0	ffice soug	ht			Office held
	SAPORGICAL CONTROL CONTROL									

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide explains		ages/Contract Labor	OTHER (enter a cate	egory not listed above)
1	Total pages Schedule F1: Sch: 4/20 Rpt: 16/33	2 FILER NAM Price, Bets		×		3 Filer ID	
Ļ							
4	Date 06/25/2019	5 Payee nam CONSTAN	e NT CONTACT				
6	Amount (\$) \$207.87	7 Payee addr 3232 MCk DALLAS,	CINNEY AVE STE 660	e; Zip Coo	de		
8	PURPOSE	(a) Category (See Categories listed at the top of this sc	hedule)	(b) Description		
	OF EXPENDITURE	Office Ove	rhead/Rental Expense		Larrent Control	outside of Texas. Complete TX, officeholder living exp	
					learned.	EMAIL SERVICES	
					ONIVII MIGHT		
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office soug	ght	Office held	
	Date	Payee name	e				
	05/14/2019	CORK & P	PIG				
	Amount (\$)	Payee addr	ess; City; State	; Zip Coo	le		
	\$179.55	2869 CRO	CKETT STREET				
		FORT WO	RTH, TX 76107	Т			
	PURPOSE OF		See Categories listed at the top of this scl	hedule)	(b) Description	outside of Texas. Complete	Schodulo T
	EXPENDITURE	Food/Beve	erage Expense	1	terment of the same of the sam	TX, officeholder living expe	
					CITY STAFF I		2000/2004
				1			
	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name (Office soug	ht	Office held	
40000	Date	Payee name	9				
	04/29/2019	DENSON,	BRAD				
	Amount (\$)	Payee addre	ess; City; State	; Zip Cod	le		
	\$300.00	2270 FM22	210 W				
		PERRIN, T	X 76486	antender te slat et de la la comprese part			
	PURPOSE OF		See Categories listed at the top of this sch	nedule) (b) Description		Ostadula T
	EXPENDITURE	Event Expe	ense	1	- comment	utside of Texas. Complete : TX, officeholder living expe	
					learned.	ERVICES FOR CA	
							announced to the control of the cont
	Complete ONLY if direct	Candidate/Off	iceholder name (Office sough	 ht	Office held	
	expenditure to benefit C/OF		.ccoldor namo	oo ooagi	,		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	By - cal Co	mmittee	Gift/Awards/Memor Legal Services The Instruction			Wage	es/Contract Labor		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID
	Sch: 5/20 Rpt: 17/33		Price, Betsy							
4	Date	5	Payee name							
	06/02/2019		FIGERS HO	LDINGS PT	/ LTD					
6	Amount (\$) \$366.68	7	Payee addres 2/12 VISTA		State	e; Zip Co	ode			
			MOSMAN Z	Z NSW2088	Australia		posterior		West Control	
8	PURPOSE OF	(a)		e Categories listed	at the top of this sc	hedule)	(b)	Description		
	EXPENDITURE		Travel Out o	of District						de of Texas. Complete Schedule T.
								hand.		officeholder living expense CT TRAVEL FOR DFW AIRPORT
								001 01 2101		OT THE OWNER OF THE OWNER OF THE
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	eholder name		Office sou	ght			Office held
	Date	Π	Payee name							
	05/20/2019		FORT WOR	TH POLICE F	OUNDATIO	Ν				
	Amount (\$)	Т	Payee addres	s; City;	State	; Zip Co	de		-	
	\$500.00		11000 HEM	PHILL STREE	ET SUITE 30	4				
			-	TH, TX 76104						
	PURPOSE OF			e Categories listed a	t the top of this sch	nedule)	(b)	Description		
	EXPENDITURE		Event Exper	ise				-		le of Texas. Complete Schedule T. officeholder living expense
								EVENT SPON		
	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Offic	eholder name	C	Office sou	ght			Office held
	Date		Payee name							
	05/08/2019		FUNDRAISI	NG SOLUTIO	NS					
-	Amount (\$)	-	Payee addres	s; City;	State;	Zip Coo	de	-0	and the same	
	\$1,843.00		1505 ELM S	TREET SUITI	E #405					
	, ,									
		l	DALLAS, TX	75201			-			
	PURPOSE OF			Categories listed at		edule)	(b)	Description		
	EXPENDITURE		Solicitation/F	undraising Ex	pense			August 1		e of Texas. Complete Schedule T. Ifficeholder living expense
								larged.		DRAISING SERVICES
						- 1		<i>57</i> 7 61 7 1	0.1	DIVIONO DEIXVIDED
	Complete ONLY if direct		andidate/Offic	eholder name		Office soug	ht	be a second consequence and construction of the construction of th	-	Office held
	expenditure to benefit C/OH		andidate/Offici	AIGIGGI HAITIC		mee soug	ric			Since field
-			ummasay sa	Walanawa I (a walana a mara			-			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politic Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 6/20 Rpt: 18/33	Price, Betsy
4 Date	5 Payee name
05/08/2019	GLEN E. ELLMAN PHOTOGRAPHER
6 Amount (\$) \$275.00	7 Payee address; City; State; Zip Code PO BOX 126081
	BENBROOK, TX 76126
8 PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PHOTOGRAPHY FOR CAMPAIGN DINNER EVENT
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/08/2019	GLEN E. ELLMAN PHOTOGRAPHER
Amount (\$)	Payee address; City; State; Zip Code
\$1,150.00	PO BOX 126081
	BENBROOK, TX 76126
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PHOTOGRAPHY FOR CAMPAIGN FUNDRAISING EVENT
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/01/2019	GOODY GOODY #15
Amount (\$) \$411.78	Payee address; City; State; Zip Code 3316 OAKLAWN AVE
	DALLAS, TX 75219
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense BEVERAGES FOR CAMPAIGN FUNDRAISING EVENT
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Printing Expense Salaries/Wages/Contract Labor Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule F1: 2 FILER NAME Price, Betsy Sch: 7/20 Rpt: 19/33 Date 5 Payee name GRANT MILLER GROUP LLC 06/01/2019 State; Zip Code 6 Amount (\$) Payee address; City; \$300.00 5115 OAK SHADOW CT **DALLAS, TX 75287 PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense PHOTOGRAPHY FOR CAMPAIGN FUNDRAISING **EVENT** Office sought Office held Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name 06/01/2019 HILLWOOD URBAN State; Zip Code Payee address; City; Amount (\$) 3000 TURTLE CREEK BLVD \$275.00 DALLAS, TX 75219 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense FACILITY AND JANITORIAL SERVICES FOR CAMPAIGN FUNDRAISING EVENT Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name HOBBS, DAVID 04/30/2019 Payee address; State; Zip Code Amount (\$) City; \$300.00 825 SAM BASS COURT WILLOW PARK, TX 76087 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense SECURITY SERVICES FOR CAMPAIGN EVENT Office sought Office held Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wanes/Contract Labor Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

	Candidate/Officeholder/Politica Credit Card Payment	Cal Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 8/20 Rpt: 20/33	Price, Betsy	
4	Date	5 Payee name	
	06/03/2019	HURRICANE'S GRILL	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$177.57	L202-L203 GATEWAY BLDG	
		1 MACQUARIE PL	
		SYDNEY ZZ NSW2000 Australia	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		MEAL WITH DELEGATES OF BUSINESS MISS	SION
		IN AUSTRALIA	
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
	experience to benefit ere.		
	Date	Payee name	
	04/26/2019	IMAGINATION FORT WORTH	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.00	1300 GENDY STREET, SUITE 210	
		FORT WORTH, TX 76107	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		EVENT SPONSORSHIP	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OF	H	
	Date	Payee name	
	04/29/2019	INSTALL CONNECT INC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,200.00	505 W STATE STREET	
		GARLAND, TX 75040	
dones-cono	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		INSTALLATION OF CAMPAIGN SIGNS	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OF		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donati Candidate/Officeh Credit Card Payment	holder/Politica	/ - Il Committee	Gift/Awards/Memorials Ex Legal Services The Instruction Guid	Salaries	/Wage	es/Contract Labor		Travel Out of District OTHER (enter a cate	egory not listed above)	
1 Total pages Sche	edule E1:	2 ELLER NAME					3 F	iler ID		norphysics.
Sch: 9/20 Rpt:		Price, Betsy						iici ib		
4 Date		5 Payee name			-			-		
05/08/2019			CHRISTIAN							
							7.000			_
6 Amount (\$)		7 Payee addre		State; Zip C	oae					
\$	\$200.00	6128 CURZ	ON AVENUE							
		FORT WOF	RTH, TX 76116							
8 PURPOSE		(a) Category (So	ee Categories listed at the t	op of this schedule)	(b)	Description				
OF EXPENDITURE	.	Advertising				accessed in the second		of Texas. Complete		
EXI ENDITORE						hamed .		ficeholder living expo		
						CAMPAIGN S	SIGN	IINSTALLATI	ON	
			·					en kalaur punner sehakkin punke kalaur kenada serik kalaur da da da penada serik kalaur		
9 Complete ONLY i expenditure to be		Candidate/Offi	ceholder name	Office so	ught			Office held		
experientare to be	ment or or									
Date		Payee name								
06/01/2019	l	JOY COOK	DESIGNS							
Amount (\$)		Payee addres	ss; City;	State; Zip C	ode					
10.00	300.94	4633 INSUF	RANCE LN							
		DALLAC T	/ 7F20F							
		DALLAS, T	X 75205							
PURPOSE OF	1		e Categories listed at the to	op of this schedule)	(b)	Description				
EXPENDITURE	I	Event Exper	nse					of Texas, Complete ficeholder living expe		
									R CAMPAIGN	
						FUNDRAISIN			TO CONTROL TO THE	
O I . I . ONII W.	(- I' t	Candidate/Offic		O#i				Office held		-
Complete ONLY is expenditure to be			cenoider name	Office so	ugnt			Office field		
Date		Payee name								
04/30/2019		JP SOLUTION	ONS							
Amount (\$)		Payee addres	s; City;	State; Zip Co	ode					
\$1,	200.00	6421 FERSI	HAW PLACE							
		FORT WOR	TH, TX 76116							
DUDDOOF					100	B 111	-		-	\dashv
PURPOSE OF	1		e Categories listed at the to		(10)	Description Check if travel or	utside r	of Texas. Complete S	Schedule T	- 1
EXPENDITURE	l	Office Overr	nead/Rental Expen	ise		house		ceholder living expe		
						CAMPAIGN M				
	1			a						
Complete ONLY if	f direct	Candidate/Offic	eholder name	Office sou	laht		-	Office held		\dashv
expenditure to ber			Choider Haille	Onice 300	giit			Omoc riciu		
			and the state of t					water programme in Quinty laboration in the con-		\dashv

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order research set listed chara)

	Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
L		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
L	Sch: 10/20 Rpt: 22/33	Price, Betsy
4	Date	5 Payee name
	06/01/2019	JP SOLUTIONS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,200.00	6421 FERSHAW PLACE
		FORT WORTH, TX 76116
Ļ		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		CAMPAIGN MANAGEMENT SERVICES
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
L		
	Date	Payee name
	06/30/2019	JP SOLUTIONS
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	6421 FERSHAW PLACE
		FORT WORTH, TX 76116
	PURPOSE	<u> </u>
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		CAMPAIGN MANAGEMENT SERVICES
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Dayroo nama
	06/25/2019	Payee name LEADERSHIP FORT WORTH
	Amount (\$)	Payee address; City; State; Zip Code
	\$800.00	PO BOX 11371
		FORT WORTH, TX 76110
*consulton	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		EVENT SPONSORSHIP
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
	,	

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	y - al Committee	Polling Ex Printing Ex Salaries/M	kpense /ages/Contract Labor		Transportation Equipment & Related Expense Travel out of District OTHER (enter a category not listed above)					
_	T. 1. 1 O. 1. 1. 1. 54	Ia suspana	The Instruction Guide expl	ains now to co	mpiete this form.	T _a	F" 10				
1	Total pages Schedule F1: Sch: 11/20 Rpt: 23/33	Price, Bets				3	Filer ID				
4	Date	5 Payee name				<u></u>					
	05/02/2019		EDIA GROUP								
6	Amount (\$) \$8,050.00		KWOOD DRIVE	tate; Zip Co	de						
L		SUNNYVALE, TX 75182 (a) Category (See Categories listed at the top of this schedule) (b) Description									
8	PURPOSE OF EXPENDITURE	(a) Category (a) Advertising	See Categories listed at the top of thi	, TX, (outside of Texas. Complete Schedule T. , TX, officeholder living expense FACEBOOK AND DIGITAL ADS						
9	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office souç	ght	,	Office held				
	Date	Payee name									
	06/25/2019	MAYES MI	EDIA GROUP								
	Amount (\$)	Payee addre	ess; City; St	ate; Zip Cod	le						
	\$3,276.56	312 CREE	KWOOD DRIVE								
		SUNNYVA	LE, TX 75182								
	PURPOSE OF EXPENDITURE	(a) Category (s Advertising	ee Categories listed at the top of this Expense	s schedule)	Check if Austin,	TX, o	e of Texas. Complete Schedule T. officeholder living expense NS PRINTING AND INSTALLATION				
	Complete ONLY if direct expenditure to benefit C/Oh		ceholder name	Office soug	ht		Office held				
	Date	Payee name									
	06/25/2019		DIA GROUP								
	Amount (\$) \$1,283.00	Payee addre 312 CREE	ss; City; Sta KWOOD DRIVE	ate; Zip Cod	e						
		SUNNYVAL	E, TX 75182		¥						
An Star Auran	PURPOSE OF EXPENDITURE	(a) Category (so Advertising	ee Categories listed at the top of this Expense	schedule)	Check if Austin,	TX, of	e of Texas. Complete Schedule T. Ifficeholder living expense I MESSAGE CAMPAIGN AND SE				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Offi	ceholder name	Office sough	nt		Office held				
	agente de la companya como esta esta como esta egun						Н, особи особи по на почина на почина на при в се том на на почина на выбочни выдарать с особи воздание до поч				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 Contributions/ Donations Made By -Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 12/20 Rpt: 24/33 Price, Betsy Date Payee name 05/02/2019 MAYES MEDIA GROUP State; Zip Code Amount (\$) Payee address; City; \$1,500.00 312 CREEKWOOD DRIVE SUNNYVALE, TX 75182 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense CAMPAIGN MEDIA CONSULTING SERVICES Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name MAYES MEDIA GROUP 05/02/2019 Payee address; City; State; Zip Code Amount (\$) \$11,000.00 312 CREEKWOOD DRIVE SUNNYVALE, TX 75182 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense CAMPAIGN PHONE BANK Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Pavee name 05/02/2019 MAYES MEDIA GROUP State; Zip Code Amount (\$) Payee address; City; 312 CREEKWOOD DRIVE \$7,672.20 SUNNYVALE, TX 75182 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Printing Expense EXPENDITURE** Check if Austin, TX, officeholder living expense CAMPAIGN MAILER DESIGN, PRINTING AND MAILING Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME	Ξ				-		3	Filer ID
	Sch: 13/20 Rpt: 25/33		Price, Bets								
4	Date	5	Payee name								
	05/02/2019	L	MAYES ME	DIA G	ROUP						
6	Amount (\$)	7	Payee addre	ss;	City;	Stat	e; Zip	Code			
	\$14,719.86		312 CREEK	(WOOI	D DRIVE						
			SUNNYVAI	E, TX	75182						
8	PURPOSE OF	(a)	Category (S		ries listed at the	top of this so	chedule)	(b)	Description		the ATTOWN Complete Calculate T
	EXPENDITURE		Printing Exp	ense				1			de of Texas. Complete Schedule T. officeholder living expense
											ILER DESIGN, PRINTING AND
								1	MAILING		
9	Complete ONLY if direct		Candidate/Offi	ceholde	r name		Office s	sought			Office held
	expenditure to benefit C/O	H 									
	Date		Payee name								
	05/04/2019		MICHAELS	CUISI	NE						
	Amount (\$)		Payee addre	ss;	City;	State	e; Zip	Code			
	\$7,000.00		3413 W 7TI	1ST							
			FORT WOF	RTH, T	K 76107						
	PURPOSE	(a)	Category (Se	ee Categor	ies listed at the	top of this sc	hedule)	(b)	Description		
	OF EXPENDITURE		Event Expe	nse				1			de of Texas. Complete Schedule T.
									antena .		officeholder living expense /ERAGES FOR CAMPAIGN
									ELECTION P		
	Complete ONLY if direct		andidate/Offi	ceholde	r name		Office s	ouaht		-	Office held
	expenditure to benefit C/O		and date of the	00110140				- g			
	Date		Payee name								
	05/14/2019		MOSAIC ST	RATE	GY PARTI	NERS LL	С				
	Amount (\$)	-	Payee addres		City;		; Zip	Code		_	
	\$4,000.00		777 TAYLO			State	, Zip	Couc			
	Ψ+,000.00		177 17(120								
			FORT WOR	TH, TX	(76102						
	PURPOSE	(a)	Category (Se	e Categori	ies listed at the	ton of this scl	nedule)	(b)	Description		
	OF EXPENDITURE		Consulting E			top of time out	.caa.c,		Check if travel of		de of Texas. Complete Schedule T.
	EXPENDITORE							1	and the same of th		officeholder living expense
									SERVICES	SIK	RATEGIC COMMUNICATION
	Complete ONLY if direct		andidate/Offic	seholdo:	name		Office s	ought			Office held
	expenditure to benefit C/OF		anuluale/OIII	, ci ioiuei	Halle		Jince S	ougnt			Since held
-		-									
			10								

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees
Food/Reverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District

	Constitutions / Donations Made B Candidate/Officeholder/Politic Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 14/20 Rpt: 26/33	Price, Betsy	
4	Date 06/11/2019	Payee name MR. WONG	
6	Amount (\$) \$258.77	7 Payee address; City; State; Zip Code 252 GEORGE STREET SYDNEY ZZ NSW2000 Australia	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense MEAL WITH DELEGATES OF BUSINESS MISSIG	NC
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
and account	Date 04/30/2019	Payee name MURTAUGH, JASON	
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 612 LOCHNGREEN TRAIL ARLINGTON, TX 76012	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SECURITY SERVICES FOR CAMPAIGN EVENT	
Julian	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
	Date 05/04/2019	Payee name MURTAUGH, JASON	
	Amount (\$) \$1,100.00	Payee address; City; State; Zip Code 612 LOCHNGREEN TRAIL	
		ARLINGTON, TX 76012	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SECURITY SERVICES FOR CAMPAIGN EVENT	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
December			

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		mmittee	Gift/Awards/Memoria Legal Services The Instruction (als Expense		Exper Wage	nse es/Contract Labor		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			VIII.			3	Filer ID
	Sch: 15/20 Rpt: 27/33		Price, Betsy							
4	Date	5	Payee name							
	05/02/2019		MYERS, CE	LIA						
6	Amount (\$)	7	Payee address			; Zip C	ode			
	\$350.00	1	4915 WEST	HANOVER A	VENUE					
		L	DALLAS, TX	75209			т —			
8	PURPOSE OF	(a)		e Categories listed at		nedule)	(b)	Description		
	EXPENDITURE		Salaries/Wa	ges/Contract I	_abor		1	Control of the Contro		le of Texas. Complete Schedule T. officeholder living expense
								largered.		NTRACT LABOR
9	Complete ONLY if direct	<u>_</u>	Candidate/Offic	eholder name		Office sou	laht		-	Office held
9	expenditure to benefit C/Ol		Januluale/Onic	enoider name		JIIICE 301	zgrit			Office Held
	Date	Π	Payee name							
	04/25/2019		PIRYX, INC.							
	Amount (\$)	T	Payee addres	s; City;	State	; Zip Co	ode			
	\$1,600.17		144 SECON	D ST						
	·									
			SAN FRANC	CISCO, CA 94	105	no kasansan sa na	-			
	PURPOSE	(a)	Category (See	e Categories listed at	the top of this sch	edule)	(b)	Description		
	OF EXPENDITURE		Fees					and the second		e of Texas. Complete Schedule T.
	Characteristics (Interesting State Space Age Locate State Character)							Local		officeholder living expense card fees for processing multiple
								contributions		
	Complete ONLY if direct	C	andidate/Offic	eholder name	C	Office sou	<u>l</u> ight			Office held
	expenditure to benefit C/O	-l 				·	N			
	Date		Payee name							
	06/05/2019		PRICE, BET	SY						
	Amount (\$)		Payee address	s; City;	State;	Zip Co	de			
	\$23.32		3908 SUMM	ERCREST						
			FORT WORT	ГН, ТХ 76109						
	PURPOSE	(a)	Category (See	Categories listed at	the top of this sch	edule)	(b)	Description		
	OF EXPENDITURE		Loan Repayr	nent/Reimburs	sement					of Texas. Complete Schedule T.
								anned.		fficeholder living expense
								EXPENSES	VILI	NO SCHEDOLE & CAMPAIGN
	Complete ONLY if dive		andidata/Office	sholder name		Office cour	ab+		-	Office held
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Office	moluer name	Ü	Office sou	ynt			Onice field
					Nessymptonia del destina remanente per apada del balto		in and the			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Event Expense Accounting/Banking Consulting Expense Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Travel in District Food/Beverage Expense Printing Expense
Salaries/Wages/Contract Labor Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Travel Out of District
OTHER (enter a category not listed above) Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 16/20 Rpt: 28/33 Price, Betsy Date Payee name 04/29/2019 QUINTANA, ROMEL 6 Amount (\$) Payee address; City; State; Zip Code \$300.00 3138 MEANDERING WAY GRANBURY, TX 76049 8 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense SECURITY SERVICES FOR CAMPAIGN EVENT Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/29/2019 REATA FORT WORTH Amount (\$) Payee address; City; State; Zip Code \$138.39 310 HOUSTON STREET SUNDANCE SQUARE FORT WORTH, TX 76102 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense OFFICERHOLDER DINNER WITH CONSTITUENTS Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/20/2019 RED PRODUCTIONS State; Zip Code Amount (\$) Payee address; City; \$5,000.00 329 S. MAIN STREET FORT WORTH, TX 76104 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Solicitation/Fundraising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense CAMPAIGN VIDEO PRODUCTION Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees
Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		mmittee	Gift/Awards/Memoria Legal Services The Instruction	5. B. Asir		Wag	es/Contract Labor		Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	12	FILER NAME						3	Filer ID	
-	Sch: 17/20 Rpt: 29/33	-	Price, Betsy						١	THE ID	
4	Date	=	D								-
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	06/25/2019		RED PROD	OUCTIONS							
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	ode				
	\$4,871.25		329 S. MAII	N STREET							
			CODT MOD	TH TV 7010	ı						
			FURT WUF	RTH, TX 76104					-		
8	PURPOSE	(a)	Category (Se	ee Categories listed a	t the top of this sch	nedule)	(b)	Description			
	OF EXPENDITURE		Solicitation/	Fundraising Ex	rpense		1	Check if travel of	outsi	de of Texas. Complete Schedule T.	
	EXPENDITORE	1						the same of the sa		officeholder living expense	
							-	CAMPAIGN \	۷ID	EO PRODUCTION	
9	Complete ONLY if direct		andidate/Offi	ceholder name	(Office sou	ıght			Office held	-
	expenditure to benefit C/O										
est kering		7							-		_
	Date	1	Payee name								
	04/30/2019		ROBERT, J	USTIN						3	
20120120	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode				
	\$300.00		2102 RIDGE	CREST DRIV	Έ						
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Artonia			WEATHER	ORD, TX 760	87						
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Event Exper					Name of the last o		de of Texas. Complete Schedule T.	1
	LAFENDITORE					- 1				officeholder living expense	
								SECURITY SI	ER'	VICES FOR CAMPAIGN EVENT	
	Complete ONLY if direct		andidate/Offic	eholder name	O	Office sou	ght			Office held	٦
	expenditure to benefit C/OF	H									١
	Data		D-11-1								=
	Date		Payee name	LIAMONIOTO	אסע בו ואוס						ı
	04/29/2019		ROGER WIL	LIAMS VICTO	RY FUND		neyto-read			-	
	Amount (\$)	F	Payee addres	s; City;	State;	Zip Co	de				
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			AUSTIN, TX	79701							1
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	PURPOSE			Categories listed at		dule)	(b)	Description			١
	OF EXPENDITURE			s/Donations M				The same of the sa		e of Texas. Complete Schedule T.	١
		(Candidate/O	fficeholder/Pol	itical Commi	ttee		levent .		officeholder living expense	1
						1		CAMPAIGN C	ON	TRIBUTION	١
	70 MM C 4 A										
	Complete ONLY if direct		andidate/Offic	eholder name	0	ffice soug	ght			Office held	1
1	expenditure to benefit C/OH	ł									
lommon.									-		\dashv
OFF	ne provided by Toyac Et	hioc	Commissio	n 14	MANA othics st	oto tre un	_		-	Vorcion V1 1 OofO1a	

SCHEDULE F1

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

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel Out of District

Polling Expense
Printing Expense
Salaries/Wages/Contract Labor Travel in District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule F1: 2 FILER NAME Sch: 18/20 Rpt: 30/33 Price, Betsy 4 Date 5 Payee name 04/30/2019 SALAZAR, JOSE State; Zip Code Amount (\$) Payee address; City; \$300.00 1411 S LAKE STREET FORT WORTH, TX 76104 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense SECURITY SERVICES FOR CAMPAIGN EVENT Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name SALAZAR, JOSE 05/04/2019 Payee address; City; State; Zip Code Amount (\$) \$1,100.00 1411 S LAKE STREET FORT WORTH, TX 76114 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense SECURITY SERVICES FOR CAMPAIGN EVENT Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 06/11/2019 SALVATION ARMY City; State; Zip Code Amount (\$) Payee address; \$250,00 1855 E LANCASTER AVE FORT WORTH, TX 76103 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee DONATION Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Credit Card Payment

EXPENDITURE CATEGORIES FOR BOX 8(a)

Solicitation/Fundraising Expense Travel Out of District

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Travel in District Fees Food/Beverage Expense Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 19/20 Rpt: 31/33 Price, Betsy 4 Date Pavee name 05/13/2019 SMALL WONDER COMMUNICATIONS 6 Amount (\$) Payee address; City; State; Zip Code \$500.00 1712 JENSON ROAD FORT WORTH, TX 76112 **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense CAMPAIGN SOCIAL MEDIA CONSULTING & WRITING SERVICES Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/05/2019 SMALL WONDER COMMUNICATIONS City; Amount (\$) Payee address; State; Zip Code \$500.00 1712 JENSON ROAD FORT WORTH, TX 76112 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense CAMPAIGN SOCIAL MEDIA CONSULTING & WRITING SERVICES Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 06/01/2019 SUPERIOR RELOCATION SERVICES Amount (\$) City; Payee address; State; Zip Code \$405.00 1302 AVENUE R **GRAND PRAIRIE, TX 75050 PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense FACILITIES SUPPORT FOR CAMPAIGN **FUNDRAISING EVENT** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 20/20 Rpt: 32/33 Price, Betsy Date Payee name 05/01/2019 THE LAZY MOOSE Payee address; City; State; Zip Code Amount (\$) \$597.95 1404 WEST MAGNOLIA AVENUE FORT WORTH, TX 76104 **PURPOSE** 8 (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense FOOD/BEVERAGES FOR CAMPAIGN EVENT Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 06/25/2019 THE SAVING HOPE FOUNDATIONS State; Zip Code Amount (\$) Payee address; City; \$1,000.00 950 COMMERCE STREET FORT WORTH, TX 76102 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense **EVENT SPONSORSHIP** Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Travel in District Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Consulting Expense Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 1/1 Rpt: 33/33 Price, Betsy Date Payee name 06/05/2019 AT&T 6 Amount (\$) Payee address; City; State; Zip Code PO Box 536216 \$23.32 Reimbursement from political contributions X Atlanta, GA 30353 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. (b) Description OF Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** OFFICEHOLDER IPAD DATA PLAN Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH