

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TX

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:

33

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

Betsy

NICKNAME

LAST

SUFFIX

Price

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY;

ZIP CODE

PO Box 100066

Fort Worth, TX 76185

☐ Change of Address

5 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Alice

NICKNAME

LAST

SUFFIX

Puente

6 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

2737 Calder Ct

Fort Worth, TX 76107

(Residence or Business)

7 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

817-207-8643

8 REPORT
TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign treasurer
appointment (officeholder only)

☒ July 15

☐ 8th day before election

☐ Exceeded \$500 limit

☐ Final Report (Attach C/OH-FR)

9 PERIOD
COVERED

Month Day Year

04/25/2019

THROUGH

Month Day Year

06/30/2019

10 ELECTION

ELECTION DATE

Month Day Year

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other

☐ General

☐ Special

11 OFFICE

OFFICE HELD (if any)

Mayor of Fort Worth

12 OFFICE SOUGHT (if known)

Mayor of Fort Worth

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

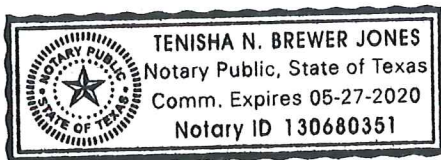
2 of 33

13 C / OH NAME Price, Betsy	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 checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	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

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 35.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 36,710.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 1,215.10
	4. TOTAL POLITICAL EXPENDITURES	\$ 99,614.54
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 307,244.10
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFADAVIT

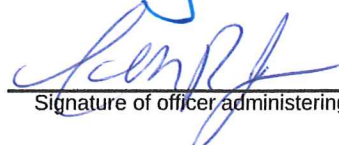


I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.


Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Betsy Price, this the 15th day of July, 2019, to certify which, witness my hand and seal of office.

 Tenisha N. Brewer Jones Executive Assistant
Signature of officer administering Printed name of officer administering Title of officer administering oath

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

3 of 33

18 FILER NAME

Price, Betsy

19 Filer ID**20 SCHEDULE SUBTOTALS**

NAME OF SCHEDULE

SUBTOTAL AMOUNT

- | | | | | |
|-----|-------------------------------------|--|----|-----------|
| 1. | <input checked="" type="checkbox"/> | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ | 34,885.00 |
| 2. | <input checked="" type="checkbox"/> | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | 1,825.00 |
| 3. | <input type="checkbox"/> | SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ | |
| 4. | <input type="checkbox"/> | SCHEDULE E: LOANS | \$ | |
| 5. | <input checked="" type="checkbox"/> | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | 99,591.22 |
| 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 checked="" type="checkbox"/> | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ | 23.32 |
| 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: 1/8 Rpt: 4/33

2 FILER NAME
Price, Betsy

3 Filer ID

4 Date
05/06/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Ahlberg, Trevor L.

7 Amount of Contribution (\$)
\$2,500.00

6 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
05/02/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Aldrich, Steven

Amount of Contribution (\$)
\$200.00

Contributor address; City; State; Zip Code
4001 Greenbriar Dr

Dallas, TX 75226

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
05/02/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Augur, Marilyn

Amount of Contribution (\$)
\$500.00

Contributor address; City; State; Zip Code
3535 Gillespie St #105

Dallas, TX 76219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/29/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Balda, Fred (Mr.)

Amount of Contribution (\$)
\$500.00

Contributor address; City; State; Zip Code
6023 Waggoner Drive

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/25/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Barnes, Bradford

Amount of Contribution (\$)
\$1,000.00

Contributor address; City; State; Zip Code
4450 Harley Avenue

Fort Worth, TX 76107

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: 2/8 Rpt: 5/33
2 FILER NAME Price, Betsy		3 Filer ID
4 Date 05/02/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beecherl, Ernest (Mr.) <hr/> 6 Contributor address; City; State; Zip Code 3801 Beverly Drive Dallas, TX 75205	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Stephen <hr/> Contributor address; City; State; Zip Code 2912 Amherst Dallas, TX 75225	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/06/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brayshaw, Leana <hr/> Contributor address; City; State; Zip Code 4300 Shenandoah Ave Dallas, TX 76205	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brosseau Jr., Charles <hr/> Contributor address; City; State; Zip Code 2735 Simondale Drive Fort Worth, TX 76109	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, William (Mr.) <hr/> Contributor address; City; State; Zip Code 5 Westover Road Fort Worth, TX 76107	Amount of Contribution (\$) \$1,000.00
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: 3/8 Rpt: 6/33
2 FILER NAME Price, Betsy		3 Filer ID
4 Date 05/02/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Charlie William (Mr.) <hr/> 6 Contributor address; City; State; Zip Code 5600 Lakeside Drive Fort Worth, TX 76197	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Community Leaders of America <hr/> Contributor address; City; State; Zip Code PO Box 40175 Washington, DC 20016	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creme, Anthony (Mr.) <hr/> Contributor address; City; State; Zip Code 5160 Peach Willow Lane Fort Worth, TX 76109	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis III, John F. <hr/> Contributor address; City; State; Zip Code 11020 Tibbs Street Dallas, TX 75230	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/16/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Demoss, Margaret (Ms.) <hr/> Contributor address; City; State; Zip Code 2600 W 7th Street #2644 Fort Worth, TX 76107	Amount of Contribution (\$) \$100.00
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: 4/8 Rpt: 7/33
2 FILER NAME Price, Betsy		3 Filer ID
4 Date 04/26/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gachman, Arnold 6 Contributor address; City; State; Zip Code 1229 Shady Oaks Lane Fort Worth, TX 76107	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/06/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Judith (Mrs.) Contributor address; City; State; Zip Code 3514 Caruth Blvd. Dallas, TX 75225	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hallam, John (Mr.) Contributor address; City; State; Zip Code 4204 Edmondson Avenue Dallas, TX 75205	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammer & Nails PAC Contributor address; City; State; Zip Code 100 E. 15th St., Ste. 600 Fort Worth, TX 76102	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/29/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Bruce (Mr.) Contributor address; City; State; Zip Code 3820 Potomac Avenue Dallas, TX 75205	Amount of Contribution (\$) \$500.00
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: 5/8 Rpt: 8/33
2 FILER NAME Price, Betsy		3 Filer ID
4 Date 05/02/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinnear, Timothy <hr/> 6 Contributor address; City; State; Zip Code 4595 Haverford Drive Frisco, TX 75034	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleuser, Tom (Dr.) <hr/> Contributor address; City; State; Zip Code 7012 Tumbling Trail Fort Worth, TX 76116	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LeBlanc, Richard (Mr.) <hr/> Contributor address; City; State; Zip Code 3001 Knox Street, Suite 207 Dallas, TX 75205	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyden, Peter (Mr.) <hr/> Contributor address; City; State; Zip Code PO box 33463 Fort Worth, TX 76162	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason Family Trust <hr/> Contributor address; City; State; Zip Code 7619 Marquette Dallas, TX 75225	Amount of Contribution (\$) \$250.00
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: 6/8 Rpt: 9/33
2 FILER NAME Price, Betsy		3 Filer ID
4 Date 05/03/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCullough, P. Mike (Mr.) <hr/> 6 Contributor address; City; State; Zip Code 3552 Centenary Drive Dallas, TX 75225	7 Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/06/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Geraldine (Ms.) <hr/> Contributor address; City; State; Zip Code 4 Lakeside Park Dallas, TX 75225	Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Doyle (The Honorable) <hr/> Contributor address; City; State; Zip Code 128 White Trail Willow Park, TX 76008	Amount of Contribution (\$) <div style="text-align: right;">\$100.00</div>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/30/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paniagua, Joe (Mr.) <hr/> Contributor address; City; State; Zip Code 8125 Mount Shasta Circle Fort Worth, TX 76137	Amount of Contribution (\$) <div style="text-align: right;">\$100.00</div>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterman, Whit (Mr.) <hr/> Contributor address; City; State; Zip Code 6627 Starling Circle Dallas, TX 75209	Amount of Contribution (\$) <div style="text-align: right;">\$250.00</div>
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: 7/8 Rpt: 10/33
2 FILER NAME Price, Betsy		3 Filer ID
4 Date 04/29/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pipes, Kasey (Mr.) <hr/> 6 Contributor address; City; State; Zip Code 3700 Country Club Circle Fort Worth, TX 76109	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Political Action Committee of Winstead PC <hr/> Contributor address; City; State; Zip Code 500 Winstead Building 2728 N. Harwood St. Dallas, TX 75201	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Victoria <hr/> Contributor address; City; State; Zip Code 5820 Forest Bend Place Fort Worth, TX 76112	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reid, Donald W. <hr/> Contributor address; City; State; Zip Code 2000 Brook Hill Court Keller, TX 76248	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/06/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan Texas PAC <hr/> Contributor address; City; State; Zip Code Three Galleria Tower, 13155 Noel Rd #100 Dallas, TX 75240	Amount of Contribution (\$) \$5,000.00
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: 8/8 Rpt: 11/33
2 FILER NAME Price, Betsy		3 Filer ID
4 Date 05/03/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaefer, Ken (Mr.) 6 Contributor address; City; State; Zip Code 2705 Manorwood Trail Fort Worth, TX 76109	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/26/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Small, Terrell Contributor address; City; State; Zip Code 3920 Monticello Drive Fort Worth, TX 76107	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/25/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweet, Mike (Mr.) Contributor address; City; State; Zip Code 3522 Caruth Boulevard Dallas, TX 75225	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/03/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vennam, Murali (Mr.) Contributor address; City; State; Zip Code 6851 Lahontan Dr. Fort Worth, TX 76132	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (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	
2 FILER NAME Price, Betsy		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 04/30/2019	6 Full name of contributor <input type="checkbox"/> 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 (\$) \$1,825.00	9 In-kind contribution description Social Media Advertising <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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: 1/20 Rpt: 13/33	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 06/25/2019	5 Payee name ASSOCIATED REPUBLICANS OF TEXAS	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 807 N BRAZOS ST STE 601 AUSTIN, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/08/2019	Candidate/Officeholder name Office sought Office held	
Payee name ATCHLEY & ASSOCIATES LLP		
Amount (\$) \$3,591.00	Payee address; City; State; Zip Code 1005 LA POSADA DRIVE AUSTIN, TX 78752	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(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 ACCOUNTING AND REPORTING SERVICES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/05/2019	Candidate/Officeholder name Office sought Office held	
Payee name ATCHLEY & ASSOCIATES LLP		
Amount (\$) \$1,731.50	Payee address; City; State; Zip Code 1005 LA POSADA DRIVE AUSTIN, TX 78752	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(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 ACCOUNTING AND REPORTING SERVICES
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: 2/20 Rpt: 14/33		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 06/08/2019		5 Payee name AUSTRALIAN WAY /SYDNEY INTERNATIONAL AIRPORT			
6 Amount (\$) \$170.41		7 Payee address; City; State; Zip Code 11 SYDNEY INTERNATIONAL TERMINAL SYDNEY ZZ NSW2020 Australia			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 CONSTITUENT GIFTS	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/13/2019		Payee name B&B BUTCHERS			
Amount (\$) \$336.64		Payee address; City; State; Zip Code 5212 MARATHON AVE FORT WORTH, TX 76109			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 OFFICERHOLDER DINNER WITH CONSTITUENTS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 06/01/2019		Payee name BON APPETIT MANAGEMENT COMPANY			
Amount (\$) \$2,049.96		Payee address; City; State; Zip Code 3000 TURTLE CREEK BLVD DALLAS, TX 75219			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 CATERING FOR CAMPAIGN FUNDRAISING EVENT	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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: 3/20 Rpt: 15/33	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 04/29/2019	5 Payee name CHARLESTON'S FORT WORTH	
6 Amount (\$) \$244.33	7 Payee address; City; State; Zip Code 3020 SOUTH HULEN FORT WORTH, TX 76109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 CITY STAFF MEAL
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/16/2019	Payee name CHARLESTON'S FORT WORTH	
Amount (\$) \$182.48	Payee address; City; State; Zip Code 3020 SOUTH HULEN FORT WORTH, TX 76109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 CITY STAFF MEAL
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/08/2019	Payee name CITY OF FORT WORTH	
Amount (\$) \$285.94	Payee address; City; State; Zip Code 200 TEXAS ST FORT WORTH, TX 76102	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REIMBURSEMENT OF OFFICEHOLDER CAMPAIGN MILEAGE FROM 1/28/2019-5/4/2019
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: 4/20 Rpt: 16/33	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 06/25/2019	5 Payee name CONSTANT CONTACT	
6 Amount (\$) \$207.87	7 Payee address; City; State; Zip Code 3232 MCKINNEY AVE STE 660 DALLAS, TX 75204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 EMAIL SERVICES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/14/2019	Payee name CORK & PIG	
Amount (\$) \$179.55	Payee address; City; State; Zip Code 2869 CROCKETT STREET FORT WORTH, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 CITY STAFF MEAL
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/29/2019	Payee name DENSON, BRAD	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 2270 FM2210 W PERRIN, TX 76486	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 SECURITY SERVICES FOR CAMPAIGN EVENT
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: 5/20 Rpt: 17/33	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 06/02/2019	5 Payee name FIGERS HOLDINGS PTY LTD	
6 Amount (\$) \$366.68	7 Payee address; City; State; Zip Code 2/12 VISTA ST MOSMAN ZZ NSW2088 Australia	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OUT OF DISTRICT TRAVEL FOR DFW AIRPORT
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/20/2019	Candidate/Officeholder name Office sought Office held	
Payee name FORT WORTH POLICE FOUNDATION		
Amount (\$) \$500.00	Payee address; City; State; Zip Code 11000 HEMPHILL STREET SUITE 304 FORT WORTH, TX 76104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 EVENT SPONSORSHIP
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/08/2019	Candidate/Officeholder name Office sought Office held	
Payee name FUNDRAISING SOLUTIONS		
Amount (\$) \$1,843.00	Payee address; City; State; Zip Code 1505 ELM STREET SUITE #405 DALLAS, TX 75201	
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 CAMPAIGN FUNDRAISING SERVICES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 6/20 Rpt: 18/33		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 05/08/2019		5 Payee name 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PHOTOGRAPHY FOR CAMPAIGN DINNER EVENT	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/08/2019		Payee name GLEN E. ELLMAN PHOTOGRAPHER			
Amount (\$) \$1,150.00		Payee address; City; State; Zip Code PO BOX 126081 BENBROOK, TX 76126			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 PHOTOGRAPHY FOR CAMPAIGN FUNDRAISING EVENT	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 06/01/2019		Payee name 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BEVERAGES FOR CAMPAIGN FUNDRAISING EVENT	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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: 7/20 Rpt: 19/33		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 06/01/2019		5 Payee name GRANT MILLER GROUP LLC			
6 Amount (\$) \$300.00		7 Payee address; City; State; Zip Code 5115 OAK SHADOW CT DALLAS, TX 75287			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 PHOTOGRAPHY FOR CAMPAIGN FUNDRAISING EVENT	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/01/2019		Payee name HILLWOOD URBAN			
Amount (\$) \$275.00		Payee address; City; State; Zip Code 3000 TURTLE CREEK BLVD DALLAS, TX 75219			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 FACILITY AND JANITORIAL SERVICES FOR CAMPAIGN FUNDRAISING EVENT	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/30/2019		Payee name HOBBS, DAVID			
Amount (\$) \$300.00		Payee address; City; State; Zip Code 825 SAM BASS COURT WILLOW PARK, TX 76087			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 SECURITY SERVICES FOR CAMPAIGN EVENT	
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: 8/20 Rpt: 20/33		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 06/03/2019		5 Payee name HURRICANE'S GRILL			
6 Amount (\$) \$177.57		7 Payee address; City; State; Zip Code L202-L203 GATEWAY BLDG 1 MACQUARIE PL SYDNEY ZZ NSW2000 Australia			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 MEAL WITH DELEGATES OF BUSINESS MISSION IN AUSTRALIA	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/26/2019		Payee name IMAGINATION FORT WORTH			
Amount (\$) \$200.00		Payee address; City; State; Zip Code 1300 GENDY STREET, SUITE 210 FORT WORTH, TX 76107			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 EVENT SPONSORSHIP	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/29/2019		Payee name INSTALL CONNECT INC			
Amount (\$) \$1,200.00		Payee address; City; State; Zip Code 505 W STATE STREET GARLAND, TX 75040			
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 INSTALLATION OF CAMPAIGN SIGNS	
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: 9/20 Rpt: 21/33	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 05/08/2019	5 Payee name JOHNSEN, CHRISTIAN	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 6128 CURZON AVENUE FORT WORTH, TX 76116	
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 SIGN INSTALLATION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2019	Payee name JOY COOK DESIGNS	
Amount (\$) \$300.94	Payee address; City; State; Zip Code 4633 INSURANCE LN DALLAS, TX 75205	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 FLORAL ARRANGEMENTS FOR CAMPAIGN FUNDRAISING EVENT
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/30/2019	Payee name JP SOLUTIONS	
Amount (\$) \$1,200.00	Payee address; City; State; Zip Code 6421 FERSHAW PLACE FORT WORTH, TX 76116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 MANAGEMENT SERVICES
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: 10/20 Rpt: 22/33	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 06/01/2019	5 Payee name JP SOLUTIONS	
6 Amount (\$) \$1,200.00	7 Payee address; City; State; Zip Code 6421 FERSHAW PLACE FORT WORTH, TX 76116	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 MANAGEMENT SERVICES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/30/2019	Candidate/Officeholder name Office sought Office held	
Payee name JP SOLUTIONS		
Amount (\$) \$500.00	Payee address; City; State; Zip Code 6421 FERSHAW PLACE FORT WORTH, TX 76116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 MANAGEMENT SERVICES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/25/2019	Candidate/Officeholder name Office sought Office held	
Payee name LEADERSHIP FORT WORTH		
Amount (\$) \$800.00	Payee address; City; State; Zip Code PO BOX 11371 FORT WORTH, TX 76110	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 EVENT SPONSORSHIP
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 11/20 Rpt: 23/33		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 05/02/2019		5 Payee name MAYES MEDIA GROUP			
6 Amount (\$) \$8,050.00		7 Payee address; City; State; Zip Code 312 CREEKWOOD DRIVE SUNNYVALE, TX 75182			
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 FACEBOOK AND DIGITAL ADS	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 06/25/2019		Payee name MAYES MEDIA GROUP			
Amount (\$) \$3,276.56		Payee address; City; State; Zip Code 312 CREEKWOOD DRIVE SUNNYVALE, TX 75182			
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 SIGNS PRINTING AND INSTALLATION	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 06/25/2019		Payee name MAYES MEDIA GROUP			
Amount (\$) \$1,283.00		Payee address; City; State; Zip Code 312 CREEKWOOD DRIVE SUNNYVALE, TX 75182			
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 TEXT MESSAGE CAMPAIGN AND VOTER DATABASE	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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: 12/20 Rpt: 24/33		2 FILER NAME Price, Betsy		3 Filer ID
4 Date 05/02/2019		5 Payee name MAYES MEDIA GROUP		
6 Amount (\$) \$1,500.00		7 Payee address; City; State; Zip Code 312 CREEKWOOD DRIVE SUNNYVALE, TX 75182		
8 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 MEDIA CONSULTING SERVICES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 05/02/2019		Payee name MAYES MEDIA GROUP		
Amount (\$) \$11,000.00		Payee address; City; State; Zip Code 312 CREEKWOOD DRIVE SUNNYVALE, TX 75182		
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 PHONE BANK
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 05/02/2019		Payee name MAYES MEDIA GROUP		
Amount (\$) \$7,672.20		Payee address; City; State; Zip Code 312 CREEKWOOD DRIVE SUNNYVALE, TX 75182		
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 MAILER DESIGN, PRINTING AND MAILING
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: 13/20 Rpt: 25/33	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 05/02/2019	5 Payee name MAYES MEDIA GROUP	
6 Amount (\$) \$14,719.86	7 Payee address; City; State; Zip Code 312 CREEKWOOD DRIVE SUNNYVALE, TX 75182	
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 CAMPAIGN MAILER DESIGN, PRINTING AND MAILING
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/04/2019	Payee name MICHAELS CUISINE	
Amount (\$) \$7,000.00	Payee address; City; State; Zip Code 3413 W 7TH ST FORT WORTH, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 AND BEVERAGES FOR CAMPAIGN ELECTION PARTY
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/14/2019	Payee name MOSAIC STRATEGY PARTNERS LLC	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 777 TAYLOR STREET FORT WORTH, TX 76102	
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 STRATEGIC COMMUNICATION SERVICES
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: 14/20 Rpt: 26/33	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 06/11/2019	5 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEAL WITH DELEGATES OF BUSINESS MISSION IN AUSTRALIA
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SECURITY SERVICES FOR CAMPAIGN EVENT
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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SECURITY SERVICES FOR CAMPAIGN EVENT
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: 15/20 Rpt: 27/33		2 FILER NAME Price, Betsy		3 Filer ID
4 Date 05/02/2019		5 Payee name MYERS, CELIA		
6 Amount (\$) \$350.00		7 Payee address; City; State; Zip Code 4915 WEST HANOVER AVENUE DALLAS, TX 75209		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(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 CONTRACT LABOR
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 04/25/2019		Payee name PIRYX, INC.		
Amount (\$) \$1,600.17		Payee address; City; State; Zip Code 144 SECOND ST SAN FRANCISCO, CA 94105		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign credit card fees for processing multiple contributions 4/25/19-6/6/19
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 06/05/2019		Payee name PRICE, BETSY		
Amount (\$) \$23.32		Payee address; City; State; Zip Code 3908 SUMMERCREST FORT WORTH, TX 76109		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REIMBURSEMENT OF SCHEDULE G CAMPAIGN EXPENSES
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: 16/20 Rpt: 28/33		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 04/29/2019		5 Payee name QUINTANA, ROMEL			
6 Amount (\$) \$300.00		7 Payee address; City; State; Zip Code 3138 MEANDERING WAY GRANBURY, TX 76049			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 SECURITY SERVICES FOR CAMPAIGN EVENT	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/29/2019		Payee name REATA FORT WORTH			
Amount (\$) \$138.39		Payee address; City; State; Zip Code 310 HOUSTON STREET SUNDANCE SQUARE FORT WORTH, TX 76102			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 OFFICERHOLDER DINNER WITH CONSTITUENTS	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/20/2019		Payee name RED PRODUCTIONS			
Amount (\$) \$5,000.00		Payee address; City; State; Zip Code 329 S. MAIN STREET FORT WORTH, TX 76104			
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 CAMPAIGN VIDEO PRODUCTION	
Complete ONLY 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: 17/20 Rpt: 29/33		2 FILER NAME Price, Betsy		3 Filer ID
4 Date 06/25/2019		5 Payee name RED PRODUCTIONS		
6 Amount (\$) \$4,871.25		7 Payee address; City; State; Zip Code 329 S. MAIN STREET FORT WORTH, TX 76104		
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 CAMPAIGN VIDEO PRODUCTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 04/30/2019		Payee name ROBERT, JUSTIN		
Amount (\$) \$300.00		Payee address; City; State; Zip Code 2102 RIDGECREST DRIVE WEATHERFORD, TX 76087		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 SECURITY SERVICES FOR CAMPAIGN EVENT
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 04/29/2019		Payee name ROGER WILLIAMS VICTORY FUND		
Amount (\$) \$250.00		Payee address; City; State; Zip Code 1005 CONGRESS AVE STE 910 AUSTIN, TX 78701		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(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 CONTRIBUTION
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: 18/20 Rpt: 30/33		2 FILER NAME Price, Betsy		3 Filer ID
4 Date 04/30/2019		5 Payee name SALAZAR, JOSE		
6 Amount (\$) \$300.00		7 Payee address; City; State; Zip Code 1411 S LAKE STREET FORT WORTH, TX 76104		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 SECURITY SERVICES FOR CAMPAIGN EVENT
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 05/04/2019		Payee name SALAZAR, JOSE		
Amount (\$) \$1,100.00		Payee address; City; State; Zip Code 1411 S LAKE STREET FORT WORTH, TX 76114		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 SECURITY SERVICES FOR CAMPAIGN EVENT
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 06/11/2019		Payee name SALVATION ARMY		
Amount (\$) \$250.00		Payee address; City; State; Zip Code 1855 E LANCASTER AVE FORT WORTH, TX 76103		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION
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: 19/20 Rpt: 31/33		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 05/13/2019		5 Payee name SMALL WONDER COMMUNICATIONS			
6 Amount (\$) \$500.00		7 Payee address; City; State; Zip Code 1712 JENSON ROAD FORT WORTH, TX 76112			
8 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 SOCIAL MEDIA CONSULTING & WRITING SERVICES	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/05/2019		Payee name SMALL WONDER COMMUNICATIONS			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 1712 JENSON ROAD FORT WORTH, TX 76112			
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 SOCIAL MEDIA CONSULTING & WRITING SERVICES	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/01/2019		Payee name SUPERIOR RELOCATION SERVICES			
Amount (\$) \$405.00		Payee address; City; State; Zip Code 1302 AVENUE R GRAND PRAIRIE, TX 75050			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 FACILITIES SUPPORT FOR CAMPAIGN FUNDRAISING EVENT	
Complete ONLY 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: 20/20 Rpt: 32/33		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 05/01/2019		5 Payee name THE LAZY MOOSE			
6 Amount (\$) \$597.95		7 Payee address; City; State; Zip Code 1404 WEST MAGNOLIA AVENUE FORT WORTH, TX 76104			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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/BEVERAGES FOR CAMPAIGN EVENT	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/25/2019		Payee name THE SAVING HOPE FOUNDATIONS			
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 950 COMMERCE STREET FORT WORTH, TX 76102			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 EVENT SPONSORSHIP	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

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
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 G: Sch: 1/1 Rpt: 33/33	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 06/05/2019	5 Payee name AT&T	
6 Amount (\$) \$23.32 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 536216 Atlanta, GA 30353	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 OFFICEHOLDER IPAD DATA PLAN
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held