CORRECTION/AMENDMENT AFFIDAVIT FORM COR-PAC FOR POLITICAL COMMITTEE Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00086559 13 Date Received COMMITTEE A Better Dallas **ELECTRONICALLY FILED** NAME 01/13/2025 TREASURER Klement, Christopher A. (Mr.) NAME Date Hand-delivered or Date Postmarked **ORIGINAL** X January 15 Runoff REPORT TYPE Receipt # Amount July 15 10th day after campaign treasurer resignation Dissolution report 30th day before election Date Processed 8th day before election Other (specify) ORIGINAL PERIOD Month Year Year Day Month Day Date Imaged **COVERED THROUGH** 10/27/2024 12/31/2024 **EXPLANATION OF CORRECTION** Yesterday afternoon, an oversight occurred in the entry of campaign contributions from our state account. This has been rectified with the addition of four campaign contribution line items, amounting to a total of \$1,750. These entries have now been properly recorded in the system. AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. Mr. Christopher A. Klement Signature of Campaign Treasurer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said ____, this the ____ _____, 20_____, to certify which, witness my hand and seal of office. Title of officer administering oath Signature of officer administering oath Printed name of officer administering oath Remember To Attach Any Part Of The Campaign Finance Report Form **Needed To Report And Explain Corrections**

FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00086559 3 COMMITTEE NAME **OFFICE USE ONLY** A Better Dallas Date Received **ELECTRONICALLY FILED** 01/13/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 7030 Wakefield St. Date Hand-delivered or Date Postmarked Change of Address Dallas, TX 75231 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Christopher A. NAME NICKNAME LAST **SUFFIX** Klement STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 7030 Wakefield St. STREET **ADDRESS** (Residence or Business) Dallas, TX 75231 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 7030 Wakefield St. MAILING **ADDRESS** Dallas, TX 75231 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (940) 300-3675 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 10/27/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
A Better Dallas			00086559	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Republican		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M X check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,015.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	3,321.94
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	14,731.61
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Christoph	ner A. Klemer	nt
		Signature of Ca	mpaign Treasu	rer
AFFIX NOTARY	' STAMP / SEAL ABOVE			
Sworn to and subscribed	I before me, by the said	, tl	his the	day
		which, witness my hand and seal of office.		
Signature of officer ac	Iministering oath	Printed name of officer administering oath	Title of office	cer administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

	4 of 13				
17 CO	MMITTE	E NAME	18 Filer ID	(Ethics Commission	n Filers)
ΑE	A Better Dallas 00086559		•	,	
19 SC	HEDULI	E SUBTOTALS			
NAME OF SCHEDULE				SUBTOTAL A	MOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,015.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9. SCHEDULE E: LOANS		\$			
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	3,321.94
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 5/13	
2	2 FILER NAME A Better Dallas			3	Filer ID (Ethics Commission 00086559	n Filers)
4	11/20/2024 5 Full name of contributor out-of-state PAC (ID#:) Arnett, Deborah 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00	
_	<u> </u>	Dallas, TX 75218	10 5 1 10 1 1			
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/02/2024 Boyer, Benjamin Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00	
	Dringing agg	Dallas, TX 75224	Employer (See Instructions	_		
	Analyst	pation / Job title (See Instructions)	Employer (See Instructions Destelle	')		
	Date Full name of contributor out-of-state PAC (ID#:) 12/12/2024 Camacho, Vladimir Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00	
		Dallas, TX 75202				
	Principal occu Vice Preside	pation / Job title (See Instructions) nt	Employer (See Instructions)		
	Date 12/17/2024	Full name of contributor out-of-state PAC (ID#:_ Groesch, Richard Contributor address; City; State; Zip Code Coppell, TX 75019)		Amount of Contribution (\$)	\$250.00
	Principal occu Property Mai	pation / Job title (See Instructions) nager	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/13/2024 Morgan, Mason Contributor address; City; State; Zip Code Little Elm, TX 75068			Amount of Contribution (\$)	\$35.00	
	Principal occu Executive Di	pation / Job title (See Instructions) rector	Employer (See Instructions)		
			1			

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 2/2 Rpt: 6/13
FILER NAME A Better Dallas	3 Filer ID (Ethics Commission Filers) 00086559
Date 5 Full name of contributor out-of-state PAC (ID#:) Totton, Michael 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$130.0
Dallas, TX 75230	
Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instruct	ions)
F / [The Instruction Guide explains how to complete this form. FILER NAME A Better Dallas Date 12/18/2024 5 Full name of contributor out-of-state PAC (ID#: Totton, Michael 6 Contributor address; City; State; Zip Code Dallas, TX 75230 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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)

Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/7 Rpt: 7/13	A Better Dallas	00086559
4 Date	5 Payee name	·
11/23/2024	Canva Pty Ltd.	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$12.99	110 Kippax St. NSW 2010	
Expenditure from		
corporate funds	Surry Hills 2010 Australia	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Subscription fee
		Cuscon pulsar rec
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI	4	
Date	Payee name	
12/23/2024	Canva Pty Ltd.	
Amount (\$)	Payee address; City; State; Zip Code	
\$12.99	110 Kippax St. NSW 2010	
Expenditure from corporate funds	Surry Hills 2010 Australia	
PURPOSE OF	2 (Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Subscription fee
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI	1	
Date	Payee name	
12/06/2024	Dollar Tree	
Amount (\$)	Payee address; City; State; Zip Code	
\$25.71	500 Volvo Pkwy	
Expenditure from		
corporate funds	Chesapeake, VA 23320	
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. Check if Austin, TX, officeholder living expense
		Plates, napkins
		· · · · · · · · · · · · · · · · · · ·
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI		

SCHEDULE F1

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

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

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 (onter a extraory not listed above)

Candidate/Officeholder/Politica Credit Card Payment	I 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 (Ethics Commission Filers)
Sch: 2/7 Rpt: 8/13	A Better Dallas 00086559
4 Date	5 Payee name
11/20/2024	Intuit Mailchimp
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$20.79	405 N Angier Ave. NE
- "	
Expenditure from corporate funds	Atlanta, GA 30308
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Subscription fee
	Subscription lee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
12/20/2024	Intuit Mailchimp
Amount (\$)	Payee address; City; State; Zip Code
\$20.79	405 N Angier Ave. NE
Expenditure from corporate funds	Atlanta, GA 30308
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Subscription fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ever	
Date	Payee name
11/05/2024	Koch, JJ
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	133 N Riverfront Blvd.
	Lockbox 39
Expenditure from corporate funds	Dallas, TX 75207
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Candidate/Officeholder/Politica Credit Card Payment	l Committee	Legal Services	Salaries/\	Wages	s/Contract Labor		OTHER (enter a	strict category not listed above)	
		The Instruction Guid	le explains how to co	omple	ete this form.				
1 Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filer	s)
Sch: 3/7 Rpt: 9/13	A Better Dal	las					00086559		
4 Date	5 Payee name								
12/09/2024	Kyles, Haley	,							
6 Amount (\$)	7 Payee addres	s; City;	State; Zip Co	ode					
\$165.32	2620 Telegr	aph Ave.							
		•							
Expenditure from corporate funds	Dallas, TX 7	5228							
8 PURPOSE	(a) Category (Se	e Categories listed at the	top of this schedule)	(b)	Description				
OF EXPENDITURE	Event Exper				Check if travel of	outsi	de of Texas. Com	plete Schedule T.	
EXPENDITORE					Check if Austin,	TX,	officeholder living	g expense	
					Reimburseme	ent	for beverag	es	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Offic	eholder name	Office sou	ught			Office he	eld	
Date	Payee name								
11/05/2024	Lee, Mike								
Amount (\$)	Payee addres	s; City;	State; Zip Co	ode					
\$500.00	4441 Norris		Otato, 2.p 0	000					
Ψ500.00	4441 (10)113	Ot.							
Expenditure from corporate funds	Dallas, TX 7	5214							
•				(h)	D				
PURPOSE OF	l	e Categories listed at the		(0)	Description Check if travel of	outci	do of Toyas Com	nplete Schedule T.	
EXPENDITURE		s/Donations Mad officeholder/Polition	,				officeholder living		
	Carididale/C	incendide/Folidi	cai Committee		Campaign Co			g expense	
					oampaign oc	,	ibation		
				<u> </u>					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Office	eholder name	Office sou	ught			Office h	eld	
Date	Payee name								
11/08/2024	Lewis, Jessi	ca							
Amount (\$)	Payee addres	s; City;	State; Zip Co	ode					
\$500.00	129 N Collin	-	, ,						
φοσοίσο		o r ca.							
Expenditure from	Suite 2210								
corporate funds	Sunnyvale, ¹	ΓX 75182							
PURPOSE	(a) Category (Se	e Categories listed at the	top of this schedule)	(b)	Description				
OF EXPENDITURE	Contribution	s/Donations Mad	e By		Check if travel of	outsi	de of Texas. Com	plete Schedule T.	
EXPENDITORE	Candidate/C	officeholder/Politic	cal Committee		ш		officeholder living	g expense	
					Campaign Co	ontr	ribution		
Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ught			Office he	eld	
expenditure to benefit C/OI	H								

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense 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

Candidate/Officeholder/Politica Credit Card Payment	Il 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 (Ethics Commission Filers)			
Sch: 4/7 Rpt: 10/13	A Better Dallas 00086559			
4 Date	5 Payee name			
12/13/2024	Marianos			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1,072.00	6300 Skillman St.			
Expenditure from corporate funds	Dallas, TX 75231			
8 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			
	Food expense			
	1 dod expende			
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/O				
Date	Payee name			
12/09/2024	Matamoros, Jonathan			
Amount (\$)	Payee address; City; State; Zip Code			
\$62.50	4317 Woodbluff Dr.			
Ψ02.30	4317 WOOdbidii Di.			
Expenditure from corporate funds	Mesquite, TX 75150			
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 Logo creation			
	Logo creation			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/O				
Date	Dougo nama			
11/01/2024	Payee name Mesquite Republican Women's PAC			
Amount (\$)	Payee address; City; State; Zip Code			
\$250.00	PO Box 851464			
Expenditure from corporate funds	Mesquite, TX 75185			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
	Candidate/Officeholder/Political Committee			
	Campaign Contribution			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OH			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
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

Candidate/Officeholder/Politica Credit Card Payment	I 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 (Ethics Commission Filers)
Sch: 5/7 Rpt: 11/13	A Better Dallas 00086559
4 Date	5 Payee name
11/18/2024	NationBuilder
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$55.00	PO Box 811428
Expenditure from corporate funds	Los Angeles, CA 90081
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Web services fee
	Web Services lee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/18/2024	NationBuilder
Amount (\$)	Payee address; City; State; Zip Code
\$55.00	PO Box 811428
— Forestitus from	
Expenditure from corporate funds	Los Angeles, CA 90081
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Web services fee
2 1 2 2 1 1 2 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
'	
Date	Payee name
11/20/2024	NationBuilder
Amount (\$)	Payee address; City; State; Zip Code
\$5.20	PO Box 811428
Expenditure from corporate funds	Los Angeles, CA 90081
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
LA LADITORL	Check if Austin, TX, officeholder living expense
	Item processing fee
0 1. 6	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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)

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/7 Rpt: 12/13	A Better Dallas 00086559
4 Date	5 Payee name
12/02/2024	NationBuilder
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$12.55	PO Box 811428
Fynanditura fram	
Expenditure from corporate funds	Los Angeles, CA 90081
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Item processing fee
	item processing ree
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payer name
12/17/2024	Payee name NationBuilder
Amount (\$)	Payee address; City; State; Zip Code
\$12.55	PO Box 811428
Ψ12.55	FO BOX 011420
Expenditure from corporate funds	Los Angeles, CA 90081
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Item processing fee
	Rem processing ree
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	-1
Date	Payee name
12/18/2024	NationBuilder NationBuilder
Amount (\$)	Payee address; City; State; Zip Code
\$6.67	PO Box 811428
Expenditure from corporate funds	Los Angeles, CA 90081
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Item processing fee
	Refit processing fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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		ges/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 7/7 Rpt: 13/13	A Better Dallas	00086559
4 Date	5 Payee name	
12/11/2024	Walmart	
6 Amount (\$) \$31.88	7 Payee address; City; State; Zip Code 702 SW 8th St.	2
	702 3vv 6ti1 3t.	
Expenditure from corporate funds	Bentonville, AR 72716	
8 PURPOSE OF	1 ' 1	Description
EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food expense
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O	Office 30dgr	it Since field