

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 27	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST John	MI W	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged
	NICKNAME	LAST Price	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			
	P O Box 224725 Suite 213 Dallas TX 75222			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (469)	PHONE NUMBER 658-7133	EXTENSION	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Zan	MI W	
	NICKNAME	LAST Holmes, Jr.	SUFFIX	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE			
P O Box 224725		Dallas TX 75222		
8 CAMPAIGN TREASURER PHONE	AREA CODE (469)	PHONE NUMBER 658-7133	EXTENSION	
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month Day Year 02 / 25 / 2020		Month Day Year 06 / 30 / 2020	
11 ELECTION	ELECTION DATE Month Day Year 11 / 03 / 2020	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any) County Commissioner-District #3	13 OFFICE SOUGHT (if known)		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME
John W Price

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

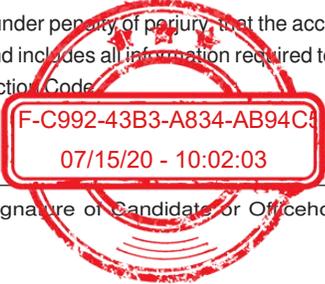
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. *THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT.* CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME
	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 17,045.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 20,190.04
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 52,037.58
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$.00

18 AFFIDAVIT

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 _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$17,045.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$0.00
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$0.00
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$0.00
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$15,672.77
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0.00
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
8.	<input checked="" type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$4,517.27
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$0.00
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$0.00
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$0.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7

2 FILER NAME
John W Price

3 Filer ID (Ethics Commission Filers)

4 Date
02/28/2020

5 Full name of contributor out-of-state PAC (ID#: _____)
Afisu Olabimtan

7 Amount of contribution (\$) \$2,000.00

6 Contributor address; City; State; Zip Code
74 Buck Trl Sadler TX 76264

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/09/2020

Full name of contributor out-of-state PAC (ID#: _____)
Thomas Gaubert

Amount of contribution (\$) \$5,000.00

Contributor address; City; State; Zip Code
1120 N Westernmoreland Road Desoto TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/09/2020

Full name of contributor out-of-state PAC (ID#: _____)
Marjoria Muse

Amount of contribution (\$) \$150.00

Contributor address; City; State; Zip Code
1084 Cove Hollow Drive Cedar Hill TX 75104

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/09/2020

Full name of contributor out-of-state PAC (ID#: _____)
Harold Short Dianne Rucker

Amount of contribution (\$) \$100.00

Contributor address; City; State; Zip Code
1136 E Five Mile Parkway Dallas TX 75216

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7

2 FILER NAME
John W Price

3 Filer ID (Ethics Commission Filers)

4 Date
03/12/2020

5 Full name of contributor out-of-state PAC (ID#: _____)
Brenda Jackson

7 Amount of contribution (\$)
\$500.00

6 Contributor address; City; State; Zip Code
5539 McCommas Dallas TX 75206

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/17/2020

Full name of contributor out-of-state PAC (ID#: _____)
Jane Heath

Amount of contribution (\$)
\$250.00

Contributor address; City; State; Zip Code
6405 Malcolm Court Dallas TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/17/2020

Full name of contributor out-of-state PAC (ID#: _____)
Communications Workers of America

Amount of contribution (\$)
\$1,250.00

Contributor address; City; State; Zip Code
1408 N. Washington St., Dallas TX 75204
Suite 200

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/17/2020

Full name of contributor out-of-state PAC (ID#: _____)
Terrance Wilkerson

Amount of contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
1415 Main Street, Suite 504 Dallas TX 75202

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7

2 FILER NAME
John W Price

3 Filer ID (Ethics Commission Filers)

4 Date
04/30/2020

5 Full name of contributor out-of-state PAC (ID#: _____)
Erma Curtis

7 Amount of contribution (\$)
\$25.00

6 Contributor address; City; State; Zip Code
1703 E Missouri Dallas TX 75216

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/23/2020

Full name of contributor out-of-state PAC (ID#: _____)
Larry James

Amount of contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
4823 Tremont Street Dallas TX 75246

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/30/2020

Full name of contributor out-of-state PAC (ID#: _____)
Russell Wilson

Amount of contribution (\$)
\$1,500.00

Contributor address; City; State; Zip Code
1910 Pacific Ave, Ste 15100 Dalla TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/30/2020

Full name of contributor out-of-state PAC (ID#: _____)
Henry Williams

Amount of contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
P. O. Box 397881 Dallas TX 75339

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7

2 FILER NAME
John W Price

3 Filer ID (Ethics Commission Filers)

4 Date
04/28/2020

5 Full name of contributor out-of-state PAC (ID#: _____)
Diana Broadus

7 Amount of contribution (\$)
\$50.00

6 Contributor address; City; State; Zip Code
3334 Seevers Avenue Dallas TX 75216

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/28/2020

Full name of contributor out-of-state PAC (ID#: _____)
Bobby Waddle

Amount of contribution (\$)
\$300.00

Contributor address; City; State; Zip Code
1015 S Cockrell Hill Road Desoto TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/28/2020

Full name of contributor out-of-state PAC (ID#: _____)
Craig Evans

Amount of contribution (\$)
\$250.00

Contributor address; City; State; Zip Code
P. O. Box 25131 Dallas TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
05/12/2020

Full name of contributor out-of-state PAC (ID#: _____)
Colleen Barrett

Amount of contribution (\$)
\$500.00

Contributor address; City; State; Zip Code
4307 Williamsburg Dallas TX 75220

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7

2 FILER NAME
John W Price

3 Filer ID (Ethics Commission Filers)

4 Date
05/19/2020

5 Full name of contributor out-of-state PAC (ID#: _____)
Albert Smith

7 Amount of contribution (\$)
\$50.00

6 Contributor address; City; State; Zip Code
P O Box 332 Watts OK 75964

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
05/19/2020

Full name of contributor out-of-state PAC (ID#: _____)
Larry Henderson

Amount of contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
809 Foxtail Dr. Mansfield TX 76063

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
05/06/2020

Full name of contributor out-of-state PAC (ID#: _____)
Valencia Nash

Amount of contribution (\$)
\$270.00

Contributor address; City; State; Zip Code
P. O. Box 411375 Dallas TX 75241

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
05/06/2020

Full name of contributor out-of-state PAC (ID#: _____)
John and Marsha Benda

Amount of contribution (\$)
\$2,000.00

Contributor address; City; State; Zip Code
801 S Riverfront Blvd Dallas TX 75207

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7

2 FILER NAME
John W Price

3 Filer ID (Ethics Commission Filers)

4 Date
05/12/2020

5 Full name of contributor out-of-state PAC (ID#: C00386029)
HNTB Holdings PAC

7 Amount of contribution (\$)
\$1,000.00

6 Contributor address; City; State; Zip Code
5910 West Plano Parkway, Plano TX 75093
Suite 200

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
06/18/2020

Full name of contributor out-of-state PAC (ID#: _____)
Joyce Strickland

Amount of contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
3615 South Blvd. Dallas TX 75215

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/18/2020

Full name of contributor out-of-state PAC (ID#: _____)
Ernie Sadau

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

Contributor address; City; State; Zip Code
3616 Greenbriar Dallas TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/18/2020

Full name of contributor out-of-state PAC (ID#: _____)
Pamela Mickens

Amount of contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
2741 Meadow Dawn Lane Dallas TX 75237

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7

2 FILER NAME
John W Price

3 Filer ID (Ethics Commission Filers)

4 Date
06/18/2020

5 Full name of contributor out-of-state PAC (ID#: _____)
Bobby Pope

7 Amount of contribution (\$)
\$100.00

6 Contributor address; City; State; Zip Code
P. O. Box 159 Garland TX 75058

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
06/18/2020

Full name of contributor out-of-state PAC (ID#: _____)
Darlene Maxwell

Amount of contribution (\$)
\$150.00

Contributor address; City; State; Zip Code
1920 Appalachia Drive Mesquite TX 75149

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

POLITICAL EXPENDITURES MADE 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: 10	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)			
4 Date 02/25/2020	5 Payee name Finishing and Mailing Center				
6 Amount (\$) \$3,105.00	7 Payee address; City; State; Zip Code 2151 W Commerce Street Dallas TX 75212				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PrintingExpense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name John Price</td> <td style="width:20%;">Office sought County Commissioner D</td> <td style="width:20%;">Office held County Commissionior</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought County Commissioner D
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought County Commissioner D	Office held County Commissionior		
Date 02/26/2020	Payee name Aaron McCarthy				
Amount (\$) \$300.00	Payee address; City; State; Zip Code PO Box 860 Grand Prairie TX 75051				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name Marian Brown</td> <td style="width:20%;">Office sought Dallas County Sheriff</td> <td style="width:20%;">Office held Dallas County Sher</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Marian Brown	Office sought Dallas County Sheriff
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Marian Brown	Office sought Dallas County Sheriff	Office held Dallas County Sher		
Date 03/06/2020	Payee name ACR Distributors				
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1516 Seabreeze Grand Prairie TX 75052				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo mmittee	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 10	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)			
4 Date 03/06/2020	5 Payee name Texas Special Olympics				
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 13400 Immanuel Rd Pflugerville TX 78660				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCom mittee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 03/17/2020	Payee name Hailee Hall				
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1409 S Lamar Dallas TX 75215				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 04/23/2020	Payee name US Postal Service				
Amount (\$) \$15.05	Payee address; City; State; Zip Code 401 Tom Landry Hwy Dallas TX 75260				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE 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: 10	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)			
4 Date 04/21/2020	5 Payee name Adam Bazabula Campaign				
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code P. O. Box 571634 Dallas TX 75357				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCom mmittee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name Adam Bazabula</td> <td style="width:20%; border:none;">Office sought Dallas City Council</td> <td style="width:20%; border:none;">Office held Dallas City Council</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Adam Bazabula	Office sought Dallas City Council
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Adam Bazabula	Office sought Dallas City Council	Office held Dallas City Council		
Date 04/01/2020	Payee name Evans Engraving & Stampgin				
Amount (\$) \$432.00	Payee address; City; State; Zip Code 208 S. Tyler Street Dallas TX 75208				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name</td> <td style="width:20%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 04/03/2020	Payee name Thibodeaux's				
Amount (\$) \$312.76	Payee address; City; State; Zip Code 107 N Cedar Ridge Dr Duncanville TX 75116 #106				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FoodBeverageExpense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name</td> <td style="width:20%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE 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: 10	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)			
4 Date 04/07/2020	5 Payee name MMS Company Ad Specialties LLC				
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 217 North I-35E Desoto TX 75115				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name John Price</td> <td style="width:20%;">Office sought Dallas County Commiss</td> <td style="width:20%;">Office held Dallas County Com</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss	Office held Dallas County Com		
Date 04/07/2020	Payee name Evans Engraving & Stamping				
Amount (\$) \$162.00	Payee address; City; State; Zip Code 207 S. Tyler Street Dallas TX 75208				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 04/14/2020	Payee name Tea Cake Kids				
Amount (\$) \$272.62	Payee address; City; State; Zip Code P. O. Box 137 Hutchins TX 75141				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE 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: 10	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)			
4 Date 04/16/2020	5 Payee name US Postmaster				
6 Amount (\$) \$275.00	7 Payee address; City; State; Zip Code 401 Tom Landry Hwy Dallas TX 75260				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name John Price</td> <td style="width:20%; border:none;">Office sought Dallas County Commiss</td> <td style="width:20%; border:none;">Office held Dallas County Com</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss	Office held Dallas County Com		
Date 04/30/2020	Payee name MMS Company Ad Specialties LLC				
Amount (\$) \$1,600.00	Payee address; City; State; Zip Code 217 North I-35E Desoto TX 75115				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name</td> <td style="width:20%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 04/12/2020	Payee name US Postmaster				
Amount (\$) \$20.55	Payee address; City; State; Zip Code 401 Tom Landry Hwy Dallas TX 75260				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name</td> <td style="width:20%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 10	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)			
4 Date 05/03/2020	5 Payee name MMS Company Ad Specialties LLC				
6 Amount (\$) \$1,700.00	7 Payee address; City; State; Zip Code 217 North I-35E Desoto TX 75115				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PrintingExpense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name John Price</td> <td style="width:20%;">Office sought Dallas County Commiss</td> <td style="width:20%;">Office held Dallas County Com</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss	Office held Dallas County Com		
Date 05/05/2020	Payee name Hailee Hall				
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1409 S Lamar Dallas TX 75215				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name John Price</td> <td style="width:20%;">Office sought Dallas Count Commissic</td> <td style="width:20%;">Office held Dallas County Com</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas Count Commissic
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas Count Commissic	Office held Dallas County Com		
Date 05/07/2020	Payee name US Postmaster				
Amount (\$) \$660.00	Payee address; City; State; Zip Code 401 Tom Landry Hwy Dallas TX 75260				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name John Prixce</td> <td style="width:20%;">Office sought Dallas County Commiss</td> <td style="width:20%;">Office held Dallas County Com</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Prixce	Office sought Dallas County Commiss
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Prixce	Office sought Dallas County Commiss	Office held Dallas County Com		

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POLITICAL EXPENDITURES MADE 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: 10	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 05/12/2020	5 Payee name Evans Engraving & Stamping	
6 Amount (\$) \$252.00	7 Payee address; City; State; Zip Code 208 S. Tyler Street Dallas TX 75208	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date 06/04/2020	Candidate / Officeholder name MMS Company Ad Specialties LLC	
Amount (\$) \$500.00	Office sought Office held	
Date 06/02/2020	Candidate / Officeholder name John Price	
Amount (\$) \$275.00	Office sought Dallas County Commiss	
Office held Dallas County Com	Office held Dallas County Com	
Date 06/02/2020	Candidate / Officeholder name John Price	
Amount (\$) \$275.00	Office sought Dallas County Commiss	
Office held Dallas County Com	Office held Dallas County Com	

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POLITICAL EXPENDITURES MADE 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: 10	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)			
4 Date 06/02/2020	5 Payee name Hailee Hall				
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1409 S Lamar Dallas TX 75215				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) AdvertisingExpense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name John Price</td> <td style="width:20%; border:none;">Office sought Dallas County Commiss</td> <td style="width:20%; border:none;">Office held Dallas County Com</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss	Office held Dallas County Com		
Date 06/12/2020	Payee name Edna Faggett Photos				
Amount (\$) \$500.00	Payee address; City; State; Zip Code 3351 Singing Hills Dallas TX 75241				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name John Price</td> <td style="width:20%; border:none;">Office sought Dallas County Commiss</td> <td style="width:20%; border:none;">Office held Dallas County Com</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss	Office held Dallas County Com		
Date 06/09/2020	Payee name O'Reilly Auto Parts				
Amount (\$) \$586.39	Payee address; City; State; Zip Code 212 N. Hampton Rd Desoto TX 75115				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name John Price</td> <td style="width:20%; border:none;">Office sought Dallas County Commiss</td> <td style="width:20%; border:none;">Office held Dallas County Com</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss	Office held Dallas County Com		

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POLITICAL EXPENDITURES MADE 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: 10	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)			
4 Date 06/12/2020	5 Payee name Brake Stop				
6 Amount (\$) \$550.00	7 Payee address; City; State; Zip Code 4308 Live Oak Dallas TX 75204				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name John Price</td> <td style="width:20%; border:none;">Office sought Dallas County Commiss</td> <td style="width:20%; border:none;">Office held Dallas County Com</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss	Office held Dallas County Com		
Date 06/22/2020	Payee name Evans Engraving & Stamping				
Amount (\$) \$306.00	Payee address; City; State; Zip Code 208 S. Tyler Street Dallas TX 75208				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name</td> <td style="width:20%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 06/19/2020	Payee name John Ames Tax Assessor Collector				
Amount (\$) \$229.50	Payee address; City; State; Zip Code 1201 Elm Street Dallas TX 75201				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name John Price</td> <td style="width:20%; border:none;">Office sought Dallas County Commiss</td> <td style="width:20%; border:none;">Office held Dallas County Com</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss	Office held Dallas County Com		

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POLITICAL EXPENDITURES MADE 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: 10	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)			
4 Date 06/29/2020	5 Payee name Anthony Garrett Auto Repair				
6 Amount (\$) \$330.00	7 Payee address; City; State; Zip Code 1629 Pennsylvania Ave Dallas TX 75215				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name John Price</td> <td style="width:20%; border:none;">Office sought Dallas County Commiss</td> <td style="width:20%; border:none;">Office held Dallas County Com</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss	Office held Dallas County Com		
Date 06/18/2020	Payee name Paypal Fees				
Amount (\$) \$38.90	Payee address; City; State; Zip Code campaign@johnwileypri ce.com Dallas TX 75222				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AccountingBanking	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name John Price</td> <td style="width:20%; border:none;">Office sought Dallas County Commiss</td> <td style="width:20%; border:none;">Office held Dallas County Com</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commiss	Office held Dallas County Com		
Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name</td> <td style="width:20%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political 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 F4: 7	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ \$0.00
5 Date 03/10/2020	6 Payee name Office Depot	
7 Amount (\$) \$304.85	8 Payee address; City; State; Zip Code 1001 N Beckley St, Desoto TX 75115	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commissior
		Office held Dallas County Com
Date 03/31/2020	Payee name Gulf Oil	
Amount (\$) \$77.90	Payee address; City; State; Zip Code 801 S Riverfront Blvd Dalas TX 75207	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commissio
		Office held Dallas County Com

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political 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 F4: 7	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ \$0.00
5 Date 03/31/2020	6 Payee name Deluxe Full Color	
7 Amount (\$) \$554.00	8 Payee address; City; State; Zip Code 1600 East Touhy Avenue Des Plaines IL 60018	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) EventExpense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commissior
		Office held Dallas County Com
Date 04/07/2020	Payee name Amazon.com Internet Shopping	
Amount (\$) \$521.18	Payee address; City; State; Zip Code 440 Terry Ave N Seattle Seattle WA 98109	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commissio
		Office held Dallas County Com

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political 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 F4: 7	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ \$0.00
5 Date 04/02/2020	6 Payee name QuikTrip	
7 Amount (\$) \$69.03	8 Payee address; City; State; Zip Code 3311 W Pleasant Run Road Lancaster TX 75146	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commissior
		Office held Dallas County Com
Date 04/13/2020	Payee name Gulf Oil	
Amount (\$) \$72.85	Payee address; City; State; Zip Code 801 Riverfront Blvd Dallas TX 75207	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commissio
		Office held Dallas County Com

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political 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 F4: 7	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ \$0.00
5 Date 04/22/2020	6 Payee name QuikTrip	
7 Amount (\$) \$58.78	8 Payee address; City; State; Zip Code 3311 W Pleasant Run Road Lancaster TX 75146	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commissior
		Office held Dallas County Com
Date 05/02/2020	Payee name Gulf Oil	
Amount (\$) \$45.29	Payee address; City; State; Zip Code 801 Riverfront Blvd Dallas TX 75207	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commissio
		Office held Dallas County Com

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political 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 F4: 7	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ \$0.00
5 Date 05/08/2020	6 Payee name O'Reilly Auto Parts	
7 Amount (\$) \$113.07	8 Payee address; City; State; Zip Code 212 N. Hampton Rd Desoto TX 75115	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commissior
		Office held Dallas County Com
Date 06/01/2020	Payee name US Postmaster	
Amount (\$) \$34.70	Payee address; City; State; Zip Code 401 Tom Landry Hwy Dallas TX 75260	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political 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 F4: 7	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ \$0.00
5 Date 06/13/2020	6 Payee name US Postmaster	
7 Amount (\$) \$20.55	8 Payee address; City; State; Zip Code 401 Tom Landry Hwy Dallas TX 75260	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/29/2020	Payee name QuikTrip	
Amount (\$) \$49.43	Payee address; City; State; Zip Code 3311 W Pleasant Run Road Lancaster TX 75146	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Office held Dallas County Commissio Dallas County Com

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political 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 F4: 7	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ \$0.00
5 Date 05/15/2020	6 Payee name QuikTrip	
7 Amount (\$) \$47.64	8 Payee address; City; State; Zip Code 3311 W Pleasant Run Road Lancaster TX 75146	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Dallas County Commissior
		Office held Dallas County Com
Date 06/26/2020	Payee name Fiel	
Amount (\$) \$2,548.00	Payee address; City; State; Zip Code 445 Annagem Blvd Desoto TX 75115 Mississauga ON L5T 3A7 Canada	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held

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