

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: 54																			
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: small;">MS / MRS / MR</td> <td style="width:30%;">FIRST</td> <td style="width:30%;">MI</td> <td style="width:20%;"></td> </tr> <tr> <td></td> <td>John</td> <td>W</td> <td></td> </tr> <tr> <td style="font-size: small;">NICKNAME</td> <td>LAST</td> <td>SUFFIX</td> <td></td> </tr> <tr> <td></td> <td>Price</td> <td></td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI			John	W		NICKNAME	LAST	SUFFIX			Price			OFFICE USE ONLY				
MS / MRS / MR	FIRST	MI																				
	John	W																				
NICKNAME	LAST	SUFFIX																				
	Price																					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: small;">ADDRESS / PO BOX;</td> <td style="width:15%; font-size: small;">APT / SUITE #;</td> <td style="width:20%; font-size: small;">CITY;</td> <td style="width:15%; font-size: small;">STATE;</td> <td style="width:25%; font-size: small;">ZIP CODE</td> </tr> <tr> <td>217 North I-35E</td> <td>217</td> <td>DeSoto</td> <td>TX</td> <td>75115</td> </tr> </table>	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	217 North I-35E	217	DeSoto	TX	75115	Date Received										
ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE																		
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5 CANDIDATE / OFFICEHOLDER PHONE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: small;">AREA CODE</td> <td style="width:30%; font-size: small;">PHONE NUMBER</td> <td style="width:45%; font-size: small;">EXTENSION</td> </tr> <tr> <td>(469)</td> <td>659-7133</td> <td></td> </tr> </table>	AREA CODE	PHONE NUMBER	EXTENSION	(469)	659-7133		Date Hand-delivered or Date Postmarked														
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(469)	659-7133																					
6 CAMPAIGN TREASURER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: small;">MS / MRS / MR</td> <td style="width:30%;">FIRST</td> <td style="width:30%;">MI</td> <td style="width:20%;"></td> </tr> <tr> <td></td> <td>Zan</td> <td>W</td> <td></td> </tr> <tr> <td style="font-size: small;">NICKNAME</td> <td>LAST</td> <td>SUFFIX</td> <td></td> </tr> <tr> <td></td> <td>Holmes</td> <td></td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI			Zan	W		NICKNAME	LAST	SUFFIX			Holmes			Receipt #	Amount \$			
MS / MRS / MR	FIRST	MI																				
	Zan	W																				
NICKNAME	LAST	SUFFIX																				
	Holmes																					
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%; font-size: small;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:15%; font-size: small;">APT / SUITE #;</td> <td style="width:15%; font-size: small;">CITY;</td> <td style="width:10%; font-size: small;">STATE;</td> <td style="width:15%; font-size: small;">ZIP CODE</td> </tr> <tr> <td>P. O. Box 224725</td> <td></td> <td>Dallas</td> <td>TX</td> <td>75222-4725</td> </tr> </table>			STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE	P. O. Box 224725		Dallas	TX	75222-4725									
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9 REPORT TYPE	<table style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<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)											
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; text-align: center; font-size: small;">Month Day Year</td> <td style="width:25%;"></td> <td style="width:25%; text-align: center; font-size: small;">Month Day Year</td> <td style="width:25%;"></td> </tr> <tr> <td style="text-align: center;">01 / 01 / 2019</td> <td style="text-align: center;">THROUGH</td> <td style="text-align: center;">06 / 30 / 2019</td> <td></td> </tr> </table>			Month Day Year		Month Day Year		01 / 01 / 2019	THROUGH	06 / 30 / 2019												
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11 ELECTION	<table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="text-align: center; font-size: small;">ELECTION DATE</td> <td colspan="3" style="text-align: center; font-size: small;">ELECTION TYPE</td> </tr> <tr> <td style="width:10%; font-size: small;">Month</td> <td style="width:10%; font-size: small;">Day</td> <td style="width:10%; font-size: small;">Year</td> <td style="width:15%;"><input type="checkbox"/> Primary</td> <td style="width:15%;"><input type="checkbox"/> Runoff</td> <td style="width:15%;"><input type="checkbox"/> Other Description</td> </tr> <tr> <td style="text-align: center;">/</td> <td style="text-align: center;">/</td> <td style="text-align: center;">/</td> <td><input type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>	ELECTION DATE			ELECTION TYPE			Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	/	/	/	<input type="checkbox"/> General	<input type="checkbox"/> Special				
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/	/	/	<input 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.

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

Additional Pages

**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) **\$ 70,110.15**

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED **\$.00**

4. **TOTAL POLITICAL EXPENDITURES** **\$ 59,998.57**

**CONTRIBUTION
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD **\$ 79,909.64**

**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.

E-A8DE-4D36-8219-6396B
07/15/19 - 05:44:54

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	\$\$69,095.00
2.	<input checked="" type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$\$1,015.15
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	\$\$59,175.28
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	\$\$823.29
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: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/23/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Micheal & Sonia Lee <hr/> 6 Contributor address; City; State; Zip Code 5346 Cedar Waxwing Ln Dallas TX 75236	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Gaubert <hr/> Contributor address; City; State; Zip Code 1120 N Westmoreland Desoto TX 75115	Amount of contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph & Nancy White <hr/> Contributor address; City; State; Zip Code 1540 Russell Glen Ln Dallas TX 75232	Amount of contribution (\$) \$700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/22/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruel Hamilton <hr/> Contributor address; City; State; Zip Code 325 N Saint Paul St, Ste 3350 Dallas TX 75201	Amount of contribution (\$) \$5,000.00
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.		

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4 Date 04/23/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddie Henry 6 Contributor address; City; State; Zip Code 105 Pecan Lane Oak Leak TX 75154	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Afisu Olamintan Contributor address; City; State; Zip Code 74 Buck Trl Sadler TX 76264	Amount of contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/22/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helen Giddings Contributor address; City; State; Zip Code 400 S Zang Blvd, Ste 1018 Dallas TX 75208	Amount of contribution (\$) \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Rader Contributor address; City; State; Zip Code P. O. Box 249 Colleyville TX 76034	Amount of contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 04/23/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathan Johnson, Jr. 6 Contributor address; City; State; Zip Code 508 Seaside Drive Dallas TX 75232	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph Smith Contributor address; City; State; Zip Code 713 Lee Mesquite TX 75149	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barry Andrews Contributor address; City; State; Zip Code 2730 Irving Boulevard Dalla TX 75207	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karin Petties Contributor address; City; State; Zip Code 5161 Chalet Dallas TX 75232	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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4 Date 04/23/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Thomas 6 Contributor address; City; State; Zip Code 6440 N Central Expy Ste 601 Dallas TX 75206	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mehrshad Ashja Contributor address; City; State; Zip Code 14902 Preston Rd, Ste Dallas TX 75254 404-927	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin Butler Contributor address; City; State; Zip Code 132 Southwood Drive Lancaster TX 75146	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joan Smotzer Contributor address; City; State; Zip Code 1001 Belleview St, #606 Dallas TX 75216	Amount of contribution (\$) \$250.00
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.		

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4 Date 04/23/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingrid Warren 6 Contributor address; City; State; Zip Code 1201 Elm St, Ste 2200A Dallas TX 75270	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valencia Nash-McShann Contributor address; City; State; Zip Code 3714 Tioga St Dallas TX 75241	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Mason Contributor address; City; State; Zip Code 519 Highlands Dr Desoto TX 75115	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billy Ray & Leona Redmon Contributor address; City; State; Zip Code 8351 Country Road 108 Kaufman TX 75142	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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4 Date 04/23/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimberly Gray 6 Contributor address; City; State; Zip Code 5495 Beacon Hill Dr Frisco TX 75034	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheila Johnson-Tucker Contributor address; City; State; Zip Code 7010 Kiva Ln Dallas TX 75227	Amount of contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clifton Miller Contributor address; City; State; Zip Code 30 Meadowbrook Ln Trophy Club TX 76262	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maurice & Faye Barksdale Contributor address; City; State; Zip Code 2400 Table Rock Ct Arlington TX 76006	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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4 Date 04/23/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carol Arnold <hr/> 6 Contributor address; City; State; Zip Code 835 Timber Dell Ln Dallas TX 75232	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shena Washington <hr/> Contributor address; City; State; Zip Code 1126 Sandalwood Desoto TX 75115	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony R. Benson, Jr. <hr/> Contributor address; City; State; Zip Code 1443 Michigan Ave Dallas TX 75216	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacqueline Washington <hr/> Contributor address; City; State; Zip Code 1126 Sandalwood Ln Desoto TX 75115	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

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4 Date 04/23/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cecil W. Whitaker 6 Contributor address; City; State; Zip Code 2130 Oak Valley Ln Dallas TX 75232	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elvonn & Lynn Richardson Contributor address; City; State; Zip Code P. O. Box 496683 Garland TX 75049	Amount of contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bob & Linda Lydia Contributor address; City; State; Zip Code 3523 McKinney Ave #332 Dallas TX 75204	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Selas & Sharon Camarillo Contributor address; City; State; Zip Code 1327 Thistlewood Dr Desoto TX 75115	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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4 Date 04/23/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trya Brown 6 Contributor address; City; State; Zip Code 3746 Shady Hill Drive Dallas TX 75229	7 Amount of contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tracey Gulley Contributor address; City; State; Zip Code 203 Satanwood Dallas TX 75217	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklin & Renee Duggan Contributor address; City; State; Zip Code 9337 Old Nacodgoches Trl Forney TX 75126	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim Mitchell Contributor address; City; State; Zip Code 930 Poinsetta Lancaster TX 75146	Amount of contribution (\$) \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/23/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calvin Bluitte 6 Contributor address; City; State; Zip Code 6326 Old Ox Rd Dallas TX 75241	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angela Morris Contributor address; City; State; Zip Code 2150 Kessler Ct Dallas TX 75208	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Bailey Contributor address; City; State; Zip Code 1811 Meadow Valley Ln Dallas TX 75232	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joycelyn Johnson Contributor address; City; State; Zip Code 521 Missionary Ridge Desoto TX 75115	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/23/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alana McCants <hr/> 6 Contributor address; City; State; Zip Code 7934 N Macarthur Blvd, Apt Irving TX 75063 1123	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawn Cureton <hr/> Contributor address; City; State; Zip Code 3022 Stonehenge Ln Carrollton TX 75006	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levi & Patricia Williams <hr/> Contributor address; City; State; Zip Code 1328 Naples Dr Dallas TX 75232	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dr Rufus & Bernadette Green <hr/> Contributor address; City; State; Zip Code 2 Riva Ridge Frisco TX 75034	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/23/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry James 6 Contributor address; City; State; Zip Code 4823 Tremont St Dallas TX 75246	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roland Rarrish Contributor address; City; State; Zip Code 1256 Regents Park Desoto TX 75115	Amount of contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorothy McClure Contributor address; City; State; Zip Code 2132 Kessler Ct Dallas TX 75208	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diana Hamilton Broadus Contributor address; City; State; Zip Code 3334 SeEVERS Ave Dallas TX 75216	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/23/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tennell Atkins <hr/> 6 Contributor address; City; State; Zip Code P O Box 764501 Dallas TX 75376	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sam & Monica Jackson <hr/> Contributor address; City; State; Zip Code 707 Summerwood Dr Arlington TX 76017	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/29/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaughn Robinson <hr/> Contributor address; City; State; Zip Code P. O. Box 764796 Dallas TX 75376	Amount of contribution (\$) \$120.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/01/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Victor Elmore <hr/> Contributor address; City; State; Zip Code 1408 N. Riverfront Blvd #314 Dallas TX 75207	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 05/03/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Proctor 6 Contributor address; City; State; Zip Code P. O. Box 765129 Dallas TX 75216	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/30/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruel Hamilton Contributor address; City; State; Zip Code 325 N Saint Paul St, Ste 3350 Dallas TX 75201	Amount of contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/22/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry Hall Contributor address; City; State; Zip Code 4518 Rosebud Dr Rowlett TX 75089	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/25/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zan Holmes Contributor address; City; State; Zip Code 6034 Roca Raton Dallas TX 75230	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/30/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dr. Marvin Dulaney 6 Contributor address; City; State; Zip Code P. O. Box 973 Desoto TX 75123	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/24/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katherine Fain Contributor address; City; State; Zip Code 2254 AnCo Rd Elkhart TX 75839	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/24/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ester McDonald Fain Contributor address; City; State; Zip Code 2243 AnCo Rd Elkhart TX 75839	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margaret Jones Johnson Contributor address; City; State; Zip Code P. O. Box 223 Cedar Hill TX 75106	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/03/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobble Waddle <hr/> 6 Contributor address; City; State; Zip Code 1015 S Cockell Hill Rd Desoto TX 75115	7 Amount of contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillip & Judy Fisher <hr/> Contributor address; City; State; Zip Code 5022 Bilinsay Rd Seagoville TX 75159	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/01/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pettis Norman <hr/> Contributor address; City; State; Zip Code 1430 Bar Harbor Circle Dallas TX 75232	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dianne Rucker & Harold Short <hr/> Contributor address; City; State; Zip Code 1136 E Five Mile Pkwy Dallas TX 75216	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/03/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colleen Barrett <hr/> 6 Contributor address; City; State; Zip Code 4307 Williamsburg Dallas TX 75220	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/05/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Royse West <hr/> Contributor address; City; State; Zip Code 320 S R L Thornton Fwy Ste Dallas TX 75203 300	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/05/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Chase <hr/> Contributor address; City; State; Zip Code 1700 Pacific Ave Ste 3700 Dallas TX 75201	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/06/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don & Ellen Williams <hr/> Contributor address; City; State; Zip Code 2801 Turtle Creek Blvd Dallas TX 75219	Amount of contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/01/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dr. Rosie Sorrells <hr/> 6 Contributor address; City; State; Zip Code 5506 Glen Forest Ln Dallas TX 75241	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/03/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbara Bowser <hr/> Contributor address; City; State; Zip Code 1013 Graceland Desoto TX 75115	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Joshua & Joseph Johnson <hr/> Contributor address; City; State; Zip Code 906 Astaire Ave Duncanville TX 75137	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/31/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don Stafford <hr/> Contributor address; City; State; Zip Code 2913 So Houston Sch Rd Lancaster TX 75146	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/01/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pete Schenkel 6 Contributor address; City; State; Zip Code 614 Bishop Ste 3 Dallas TX 75208	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/29/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jean Jackson Contributor address; City; State; Zip Code 1150 Valley View Dr Glenn Heights TX 75154	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/01/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Stiles Contributor address; City; State; Zip Code 15000 CR 1311 Malakoff TX 75148	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/03/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etherine & Curtis Gaddis Contributor address; City; State; Zip Code 1129 The Meadows Parkway Desoto TX 75115	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/02/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BJ & Ann Smith 6 Contributor address; City; State; Zip Code 3336 Ivy Dr Mesquite TX 75150	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen Monroe Contributor address; City; State; Zip Code #1 Stonebriar Way Frisco TX 75030	Amount of contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/09/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perro Henson Contributor address; City; State; Zip Code 2948 Vacherie Lane Dallas TX 75227	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/09/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee Roy Mitchell Contributor address; City; State; Zip Code 12400 Coit Rd, Suite 800 Dallas TX 75251	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/08/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jerry Christian <hr/> 6 Contributor address; City; State; Zip Code 1440 Sunny Glen Dr Dallas TX 75232	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/31/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig Evans <hr/> Contributor address; City; State; Zip Code P O Box 25131 Dallas TX 75225	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Dunnigan <hr/> Contributor address; City; State; Zip Code 2157 Kessler Court Dallas TX 75208	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/09/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castomal & Billie Alexander <hr/> Contributor address; City; State; Zip Code 1517 Bar Harbor Dallas TX 75232	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 07/12/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig Schenkel <hr/> 6 Contributor address; City; State; Zip Code 3105 Stanford Ave Dallas TX 75225	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/05/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Benda <hr/> Contributor address; City; State; Zip Code 801 Riverfront Blvd Dallas TX 75207	Amount of contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/11/21019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carl & Lori Griffith <hr/> Contributor address; City; State; Zip Code 26985 IH10 Winnie TX 77665	Amount of contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/19/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eugene & Carol Mayo <hr/> Contributor address; City; State; Zip Code PO Box 801352 Dallas TX 75380	Amount of contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Clifford Sparks 6 Contributor address; City; State; Zip Code 3994 Sword Dancer Way Grand Prairie TX 75052	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/19/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willis Johnson Contributor address; City; State; Zip Code 1001 Belleview St Dallas TX 75215	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/19/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edgar Carter Contributor address; City; State; Zip Code 5603 Oak Falls Cir Dallas TX 75287	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/12/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiawatha Williams Contributor address; City; State; Zip Code 1141 Waterview Ln Desoto TX 75115	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/16/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marjorie Muse <hr/> 6 Contributor address; City; State; Zip Code 1084 Cove Hollow Drive Cedar Hill TX 75104	7 Amount of contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/29/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luis & Lourdes Spinola <hr/> Contributor address; City; State; Zip Code 2518 Chalk Hil Rd Dallas TX 75212	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randall Isenberg <hr/> Contributor address; City; State; Zip Code 4303 N Central Exprwy Dallas TX 75205	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/06/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merle Carmouche <hr/> Contributor address; City; State; Zip Code 5639 Marblehead Dr Dallas TX 75232	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 05/11/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Nelson	7 Amount of contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 1842 Morris St Dallas TX 75212		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisa Baron	Amount of contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code 6018 Meadow Rd Dallas TX 75230		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luis Spinola	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 4608 Wndsor Ridge Drive Irving TX 75038		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Lott	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 1012 Barclay Mesquite TX 75149		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Williams 6 Contributor address; City; State; Zip Code 8066 Park Ln. #1710 Dallas TX 75231	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry Williams Contributor address; City; State; Zip Code PO Box 397881 Dallas TX 75339	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin Blaylark Contributor address; City; State; Zip Code 6514 Autumn WoodS Trl Dallas TX 75232	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell Wilson Contributor address; City; State; Zip Code 1910 Pacific, Ste 15100 Dallas TX 75201	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/29/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddie Reeves 6 Contributor address; City; State; Zip Code 9438 Spring Hollow Dr Dallas TX 75243	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/05/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jane Heath Contributor address; City; State; Zip Code 6405 Malcolm Court Dallas TX 75215	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernetta Kinnard Contributor address; City; State; Zip Code 217 Ridgecrest Cedar Hill TX 75104	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim Lake, Jr. Contributor address; City; State; Zip Code 1704 W Colorado Blvd Dallas TX 75208	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/23/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleo Brown <hr/> 6 Contributor address; City; State; Zip Code 3746 Shady Hill Drive Dallas TX 75229	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billy Dean <hr/> Contributor address; City; State; Zip Code 124 Wildwood Ct Desoto TX 75115	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Dunnigan <hr/> Contributor address; City; State; Zip Code 2157 Kessler Court Dallas TX 75208	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/01/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George Quesada <hr/> Contributor address; City; State; Zip Code 4523 Bluffview Dallas TX 75209	Amount of contribution (\$) \$1,000.00
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.		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1	
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$0.00	
5 Date 04/23/2019	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dapheny Fain	8 Amount of Contribution \$ \$1,015.15	9 In-kind contribution description Reception Expense, Name Badges, Paper, Beverages &
7 Contributor address; City; State; Zip Code 625 Missionary Ridge Desoto TX 75115		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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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	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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 01/03/2019	5 Payee name Doris Bass	
6 Amount (\$) \$850.00	7 Payee address; City; State; Zip Code 1756 Sierra Trail Lane Dallas TX 75232	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FoodBeverageExpense	(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 Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 01/22/2019	Payee name Hailee Hall	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1409 South 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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: John Price Office sought: _____ Office held: County Commissioner	
Date 01/17/2019	Payee name Evans Engraving	
Amount (\$) \$324.00	Payee address; City; State; Zip Code 208 S. Tyler St Dallas TX 75208	
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
	9 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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 01/23/2019	5 Payee name US Postal Service	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 401 DWF Turnpike Dallas TX 75222	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Office sought: Office held:	
Date 01/29/2019	Payee name Dodd Education & Support Inc	
Amount (\$) \$145.00	Payee address; City; State; Zip Code 1401 S Akard St 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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Office sought: Office held:	
Date 02/05/2019	Payee name Fuel City	
Amount (\$) \$79.15	Payee address; City; State; Zip Code 801 Riverfront Blvd Dallas TX 75207	
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
	9 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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 02/05/2019	5 Payee name QT Fuel	
6 Amount (\$) \$67.79	7 Payee address; City; State; Zip Code 1235 E Beltline Desoto TX 75115	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: John Price Office sought: _____ Office held: County Commissioner	
Date 01/20/2019	Payee name Shell Oil	
Amount (\$) \$54.21	Payee address; City; State; Zip Code 710 W Pleasant Run Lancaster TX 75134	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: John Price Office sought: _____ Office held: County Commissioner	
Date 02/12/2019	Payee name Evans Engraving	
Amount (\$) \$306.00	Payee address; City; State; Zip Code 208 S. Tyler St Dallas TX 75208	
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
	9 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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)	
4 Date 02/14/2019	5 Payee name Tennell Atkins For City Council		
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code PO Box 764501 Dallas TX 75376		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo 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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought City Council	Office held City Council
Date 02/19/2019	Payee name US Postmaster		
Amount (\$) \$275.00	Payee address; City; State; Zip Code 401 DWF Turnpike Dallas TX 75222		
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 Pricwe	Office sought	Office held County Commissior
Date 02/13/2019	Payee name Brake Stop		
Amount (\$) \$60.00	Payee address; City; State; Zip Code 4308 Live Oak Dallas TX 75204		
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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought	Office held County Commissior

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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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 02/13/2019	5 Payee name Archives an History Programs	
6 Amount (\$) \$75.00	7 Payee address; City; State; Zip Code 7201 S Polk St # 112 Dallas TX 75232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo 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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 03/01/2019	Payee name MMS Company As Specialties, LLC	
Amount (\$) \$1,800.00	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) OfficeOverheadRentalExpense	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 Candidate / Officeholder name: John Price Office sought: _____ Office held: County Commissior	
Date 03/05/2019	Payee name Hailee Hall	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1409 Lamar St 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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: John Price Office sought: _____ Office held: County Commissior	

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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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 03/08/2019	5 Payee name Tea Cake Kids	
6 Amount (\$) \$127.68	7 Payee address; City; State; Zip Code PO Box 137 Hutchins TX 75141	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	(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 Candidate / Officeholder name Office sought Office held	
Date 03/14/2019	Payee name Lester's Car Stereo	
Amount (\$) \$334.46	Payee address; City; State; Zip Code 633 E Highway 67 Duncanville TX 75137	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held John Price County Commissioner	
Date 03/23/2019	Payee name Mufasa's Pride	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 131232 Houston TX 77219	
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
	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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 03/21/2019	5 Payee name US Postmaster	
6 Amount (\$) \$275.00	7 Payee address; City; State; Zip Code 401 DWF Turnpike Dallas TX 75222	
8 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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: John Price Office sought: _____ Office held: County Commissioner	
Date 04/02/2019	Payee name Fuel City	
Amount (\$) \$76.45	Payee address; City; State; Zip Code 801 Riverfront Blvd Dallas TX 75207	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: John Price Office sought: _____ Office held: County Commissioner	
Date 04/01/2019	Payee name QT Desoto	
Amount (\$) \$42.10	Payee address; City; State; Zip Code 1235 E Beltline 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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: John Price Office sought: _____ Office held: County Commissioner	

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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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 03/22/2019	5 Payee name Office Depot	
6 Amount (\$) \$90.00	7 Payee address; City; State; Zip Code 001 North Beckley Desoto TX 75115 Street THE CROSSINGS	
8 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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: John Price Office sought: Office held: County Commissioner	
Date 04/02/2019	Payee name MMS Company Ad Specialties LLC	
Amount (\$) \$1,061.89	Payee address; City; State; Zip Code 217 North I35E Desoto TX 75115	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) EventExpense	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 Candidate / Officeholder name: John Price Office sought: Office held: County Commissioner	
Date 04/02/2019	Payee name United States District Courts	
Amount (\$) \$38,662.99	Payee address; City; State; Zip Code 1100 Commerce St # 1452 Dallas TX 75242	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) LegalServices	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 Candidate / Officeholder name: John Price Office sought: Office held: County Commissioner	

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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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 04/19/2019	5 Payee name MMS Company Ad Specialties LLC	
6 Amount (\$) \$424.88	7 Payee address; City; State; Zip Code 217 North I35E Desoto TX 75115	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: John Price Office sought: _____ Office held: County Commissionior	
Date 04/19/2019	Payee name MMS Company Ad Specialties LLC	
Amount (\$) \$2,413.12	Payee address; City; State; Zip Code 217 North I35E Desoto TX 75115	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Stephen Mason Office sought: _____ Office held: Mayor City of Ceda	
Date 04/11/2019	Payee name Patrick LeBlanc Campaign	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 1134 Spring Lake Drive Duncanville TX 75135	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Patrick LeBlanc Office sought: _____ Office held: City Cuncil Cuncan	

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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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)			
4 Date 04/12/2019	5 Payee name Hailee Hall				
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1409 South 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 border="0" style="width:100%;"> <tr> <td style="width:50%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name John Price</td> <td style="width:15%;">Office sought</td> <td style="width:10%;">Office held County Commission</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought	Office held County Commission		
Date 04/19/2019	Payee name Thiboduaux Cajun				
Amount (\$) \$119.05	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 border="0" style="width:100%;"> <tr> <td style="width:50%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:15%;">Office sought</td> <td style="width:10%;">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 04/23/2019	Payee name Evans Engraving				
Amount (\$) \$234.00	Payee address; City; State; Zip Code 208 S. Tyler St Dalla TX 75208				
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 border="0" style="width:100%;"> <tr> <td style="width:50%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:15%;">Office sought</td> <td style="width:10%;">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		

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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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)				
4 Date 04/18/2019	5 Payee name US Postmaster					
6 Amount (\$) \$972.56	7 Payee address; City; State; Zip Code 401 DWF Turnpike Dallas TX 75222					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo 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 border="0"> <tr> <td>9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name Stephen Mason</td> <td>Office sought</td> <td>Office held Mayor City of Ceda</td> </tr> </table>			9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Stephen Mason	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Stephen Mason	Office sought	Office held Mayor City of Ceda			
Date 04/23/2019	Payee name Aaron McCarthy					
Amount (\$) \$300.00	Payee address; City; State; Zip Code PO Bo 860 Grand Prairie TX 75050					
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"> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name Carol Arnold</td> <td>Office sought</td> <td>Office held City Council City of</td> </tr> </table>			Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Carol Arnold	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Carol Arnold	Office sought	Office held City Council City of			
Date 04/24/2019	Payee name Derek Fuller					
Amount (\$) \$400.00	Payee address; City; State; Zip Code 14728 Melody Lane Forney TX 75126					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) EventExpense		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"> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name John Price</td> <td>Office sought</td> <td>Office held County Commissio</td> </tr> </table>			Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought	Office held County Commissio			

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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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 04/30/2019	5 Payee name David Retirement Beneficiary	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 2209 Sunrise Carrollton TX 75006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo 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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 05/06/2019	Payee name Hailee Hall	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1409 Lamar Dalla 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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: John Price Office sought: _____ Office held: County Commissior	
Date 05/09/2019	Payee name US Postmaster	
Amount (\$) \$660.00	Payee address; City; State; Zip Code 401 DWF Turnpike Dallas TX 75222	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: John Price Office sought: _____ Office held: County Commissior	
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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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)			
4 Date 05/09/2019	5 Payee name MMS Company Ad Specialties LLC				
6 Amount (\$) \$1,603.13	7 Payee address; City; State; Zip Code 217 North I35E Desoto TX 75115				
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 border="0" style="width:100%;"> <tr> <td style="width:50%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:30%;">Candidate / Officeholder name John Price</td> <td style="width:15%;">Office sought</td> <td style="width:15%;">Office held County Commission</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought	Office held County Commission		
Date 05/13/2019	Payee name Evans Engraving				
Amount (\$) \$234.00	Payee address; City; State; Zip Code 208 S. Tyler St Dallas TX 75208				
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 border="0" style="width:100%;"> <tr> <td style="width:50%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:30%;">Candidate / Officeholder name</td> <td style="width:15%;">Office sought</td> <td style="width:15%;">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 05/14/2019	Payee name US Postmaster				
Amount (\$) \$330.00	Payee address; City; State; Zip Code 401 DWF Turnpike Dallas TX 75222				
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			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:30%;">Candidate / Officeholder name John Price</td> <td style="width:15%;">Office sought</td> <td style="width:15%;">Office held County Commission</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought	Office held County Commission		

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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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 05/17/2019	5 Payee name Brake Stop	
6 Amount (\$) \$75.00	7 Payee address; City; State; Zip Code 4308 Live Oak Dallas TX 75204	
8 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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: John Price Office sought: _____ Office held: County Commission	
Date 05/17/2019	Payee name John Ames Tax Assessor Collector	
Amount (\$) \$229.50	Payee address; City; State; Zip Code 500 Elm Street Dallas TX 75270	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: John Price Office sought: _____ Office held: County Commission	
Date 05/21/2019	Payee name Tea Cake Kids	
Amount (\$) \$172.02	Payee address; City; State; Zip Code PO 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
	9 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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
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4 Date 05/28/2019	5 Payee name Go Federal Credit Union
-----------------------------	--

6 Amount (\$) \$545.00	7 Payee address; City; State; Zip Code 3200 W Pleasant Run Rd Lancaster TX 75134
----------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	(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	Candidate / Officeholder name John Price	Office sought	Office held County Commissioner
---	---	---------------	------------------------------------

Date 06/12/2019	Payee name John Ames Tax Assessor Collector
--------------------	--

Amount (\$) \$116.25	Payee address; City; State; Zip Code 500 Elm Street Dallas TX 75270
-------------------------	--

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
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought	Office held County Commissioner
--	---	---------------	------------------------------------

Date 06/21/2019	Payee name Tea Cake Kids
--------------------	-----------------------------

Amount (\$) \$181.75	Payee address; City; State; Zip Code PO 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
-------------------------------	--	---

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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 06/21/2019	5 Payee name Jada McCowan	
6 Amount (\$) \$224.75	7 Payee address; City; State; Zip Code 2326 McIntosh Ct Lancaster TX 75134	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: John Price Office sought: Office held: County Commissioner	
Date 06/24/2019	Payee name Hailee Hall	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1409 Lamar Dalla 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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: John Price Office sought: Office held: Coun	
Date 01/08/2019	Payee name US Postmaster	
Amount (\$) \$16.20	Payee address; City; State; Zip Code 401 DWF Turnpike Dallas TX 75222	
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
	9 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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 06/20/2019	5 Payee name Paypal	
6 Amount (\$) \$236.15	7 Payee address; City; State; Zip Code 2211 N. 1st St. San Jose CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/19/2019	Payee name US Postmaster	
Amount (\$) \$109.60	Payee address; City; State; Zip Code 401 DWF Turnpike Dallas TX 75222	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/08/2019	Payee name US Postmaster	
Amount (\$) \$20.75	Payee address; City; State; Zip Code 401 DWF Turnpike Dallas TX 75222	
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
	9 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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 03/19/2019	5 Payee name US Postmaster	
6 Amount (\$) \$16.95	7 Payee address; City; State; Zip Code 401 DWF Turnpike Dallas TX 75222	
8 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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/21/2019	Payee name US Postmaster	
Amount (\$) \$16.95	Payee address; City; State; Zip Code 401 DWF Turnpike Dallas TX 75222	
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 Office sought Office held	
Date 05/01/2019	Payee name US Postmaster	
Amount (\$) \$16.95	Payee address; City; State; Zip Code 401 DWF Turnpike Dallas TX 75222	
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 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: 4	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 04/30/2019	6 Payee name QT Gas	
7 Amount (\$) \$68.43	8 Payee address; City; State; Zip Code 1235 E Pleasant Run Desot0 TX 75115 Rd	
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 Office held County Commissior
Date 05/02/2019	Payee name Fuel City	
Amount (\$) \$69.88	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) TransportationEquipmentAndRelatedExpense	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 County Commissior

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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: 4	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 03/22/2019	6 Payee name Shell Oil	
7 Amount (\$) \$43.09	8 Payee address; City; State; Zip Code 710 W Pleasant Run Lancaster TX 75134	
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 Office held County Commissior
Date 05/20/2019	Payee name Shell Oil	
Amount (\$) \$52.00	Payee address; City; State; Zip Code 710 W Pleasant Run Lancaster TX 75134	
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) TransportationEquipmentAndRelatedExpense	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 County Commissior

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: 4	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ \$0.00
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5 Date 01/07/2019	6 Payee name Office Depot
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7 Amount (\$) \$489.59	8 Payee address; City; State; Zip Code 1001 North Beckley Desoto TX 75115 Street THE CROSSINGS
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 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
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought	Office held Coun
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Date 01/06/2019	Payee name Fuel City
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Amount (\$) \$55.00	Payee address; City; State; Zip Code 801 Riverfront Blvd Dallas TX 75207
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political
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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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought	Office held County Commissio
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: 4	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ \$0.00
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5 Date 01/15/2019	6 Payee name QT Fuel Price
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7 Amount (\$) \$45.30	8 Payee address; City; State; Zip Code 1235 E Pleasant Run Desoto TX 75115 Rd
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought	Office held County Commissior
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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