

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:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS		ADDRESS / PO BOX	APT / SUITE #, CITY, STATE, ZIP CODE
5 CANDIDATE / OFFICEHOLDER PHONE		AREA CODE	PHONE NUMBER EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
7 CAMPAIGN TREASURER ADDRESS		STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE #, CITY, STATE, ZIP CODE	
8 CAMPAIGN TREASURER PHONE		AREA CODE	PHONE NUMBER EXTENSION
9 REPORT TYPE		<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)	
10 PERIOD COVERED		Month Day Year	Month Day Year
11 ELECTION		ELECTION DATE	ELECTION TYPE
12 OFFICE		OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)
14 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.	
Additional Pages		COMMITTEE TYPE	COMMITTEE NAME
		GENERAL	COMMITTEE ADDRESS
		SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
			COMMITTEE CAMPAIGN TREASURER ADDRESS

OFFICE USE ONLY

Date Received
APR 07 2022

Date Hand-delivered or Date Postmarked

Receipt # Amount \$

Date Processed

Date Imaged

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 21.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,749.45
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 247.67
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,282.30
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,443.49
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,000.00

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

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by _____ 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 _____

OR

(2) Unsworn Declaration

My name is Angela Dierford, and my date of birth is 5/1/82
 My address is 10203 Ashborn St., Frisco, TX, 75035, USA
(street) (city) (state) (zip code) (country)
 Executed in Collin County, State of Texas, on the 7th day of April, 20 22.
(month) (year)

 Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME**

Angela Dunford

20 Filer ID (Ethics Commission Filers)**21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

1. ■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,249.45
2. ■ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 500.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. ■ SCHEDULE E: LOANS	\$ 2,000.00
5. ■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,282.30
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME Angela Dunford		3 Filer ID (Ethics Commission Filers)
4 Date 02/13/2022	5 Full name of contributor out-of-state PAC (ID# _____) Bonnie Kennedy	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 12641 S. 41st PI Phoenix, AZ 85044		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2022	Full name of contributor out-of-state PAC (ID# _____) Kayla Finch	Amount of contribution (\$) 51.99
Contributor address; City; State; Zip Code 12053 S Appaloosa Dr Phoenix, AZ 85044		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2022	Full name of contributor out-of-state PAC (ID# _____) Tabitha Davidson	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 4229 Chevy Chase Ln Frisco, TX 75033		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2022	Full name of contributor out-of-state PAC (ID# _____) Chantel Bailey	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 8500 Desert Dunes Trail McKinney, TX 75070		
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

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME Angela Dunford		3 Filer ID (Ethics Commission Filers)
4 Date 02/15/2022	5 Full name of contributor Meredith McGraw out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) 50.00
6 Contributor address; City; State; Zip Code 1266 Sunland Park Dr Frisco, TX 75033		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/15/2022	Full name of contributor Krista Brennan out-of-state PAC (ID#: _____)	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1694 East Aloe Pl Chandler, AZ 85286		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2022	Full name of contributor Jenene Boardman out-of-state PAC (ID#: _____)	Amount of contribution (\$) 206.46
Contributor address; City; State; Zip Code 560 Sheffield Dr Henderson, NV 89014		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2022	Full name of contributor Elizabeth Friend out-of-state PAC (ID#: _____)	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 9 Bishop Gate Allen, TX 75002		
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**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME Angela Dunford		3 Filer ID (Ethics Commission Filers)
4 Date 02/17/2022	5 Full name of contributor Abhi Pamarti out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 4155 Benchmark Ln Frisco, TX 75034	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/18/2022	Full name of contributor Jerry Keating out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 5629 Blazing Star Rd Frisco, TX 75034	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2022	Full name of contributor Kathleen Schade out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 7752 Petersburg Pl Frisco, TX 75035	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/27/2022	Full name of contributor Amanda Carter out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 11824 Creek Point Dr Frisco, TX 75035	Amount of contribution (\$) 50.00
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.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME Angela Dunford		3 Filer ID (Ethics Commission Filers)
4 Date 03/01/2022	5 Full name of contributor Kristin Kim out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 10112 Morning Glory Ln Frisco, TX 75035		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/01/2022	Full name of contributor Melanie Stewart out-of-state PAC (ID#: _____)	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 13258 Ironhorse Dr Frisco, TX 75035		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/01/2022	Full name of contributor Kevin Scott out-of-state PAC (ID#: _____)	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 13258 Determine Dr Frisco, TX 75035		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/02/2022	Full name of contributor Srividhya Sridharan out-of-state PAC (ID#: _____)	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 5236 Statesman Ln Frisco, TX 75035		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME Angela Dunford		3 Filer ID (Ethics Commission Filers)
4 Date 03/03/2022	5 Full name of contributor Colette McCadden out-of-state PAC (ID# _____) 6 Contributor address; City; State; Zip Code 15889 River Glen Dr Frisco, TX 75035	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/06/2022	Full name of contributor Wendy Moynihan out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code 9577 Sean Dr Frisco, TX 75035	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/15/2022	Full name of contributor Stacey Varner out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code 12402 Rosedown Ln Frisco, TX 75035	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/17/2022	Full name of contributor Michael Draper out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code 6410 Birkdale Ln Frisco, TX 75035	Amount of contribution (\$) 100.00
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.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME Angela Dunford		3 Filer ID (Ethics Commission Filers)
4 Date 03/21/2022	5 Full name of contributor Mandy Botts <small>out-of-state PAC (ID#: _____)</small>	7 Amount of contribution (\$) 25.00
6 Contributor address; City; State; Zip Code 1701 Buttercup Creek Blvd. Cedar Park, TX 78613		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/22/2022	Full name of contributor Angela Watkins <small>out-of-state PAC (ID#: _____)</small>	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 5308 Baton Rouge Blvd Frisco, TX 75035		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/22/2022	Full name of contributor Natalie Benovitz <small>out-of-state PAC (ID#: _____)</small>	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 10411 Noel Rd Frisco, TX 75035		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/23/2022	Full name of contributor Rachel Browning <small>out-of-state PAC (ID#: _____)</small>	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 14914 Huffman Ln Frisco, TX 75035		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME Angela Dunford		3 Filer ID (Ethics Commission Filers)
4 Date 03/25/2022	5 Full name of contributor Alyse Leininger out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 10374 Teal Hollow Dr Frisco, TX 75035	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/25/2022	Full name of contributor Jason Hanson out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 9615 Spring Dr Frisco, TX 75035	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/25/2022	Full name of contributor Stephanie Zollinger out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 9823 Honeysuckle Dr Frisco, TX 75035	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/26/2022	Full name of contributor Michelle Call out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 14045 Salmon Dr Frisco, TX 75035	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME Angela Dunford		3 Filer ID (Ethics Commission Filers)
4 Date 03/26/2022	5 Full name of contributor out-of-state PAC (ID# _____) Sasha Hansen 6 Contributor address; City; State; Zip Code 11415 Geranium Dr Frisco, TX 75035	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
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

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME Angela Dunford		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 500.00	
5 Date 02/12/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karen Bennett 7 Contributor address; City; State; Zip Code 4229 Chevy Chase Ln Frisco, TX 75035	8 Amount of Contribution \$ 300.00	9 In-kind contribution description Outdoor photography session & edits <small>Check if travel outside of Texas. Complete Schedule T.</small>
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 02/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karen Bennett Contributor address; City; State; Zip Code 4229 Chevy Chase Ln Frisco, TX 75035	Amount of Contribution \$ 200.00	In-kind contribution description Headshots & edits <small>Check if travel outside of Texas. Complete Schedule T.</small>
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)			
<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>			

LOANS

SCHEDULE E

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E:
2 FILER NAME Angela Dunford		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 2,000.00
5 Date of loan 02/22/2022	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Angela Dunford	9 Loan Amount (\$) 1,000.00
6 Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code 10203 Asheboro St. Frisco, TX 75035	10 Interest rate 0.00
		11 Maturity date 06/01/2023
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral none		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 03/09/2022	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Angela Dunford	Loan Amount (\$) 1,000.00
Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Lender address; City; State; Zip Code 10203 Asheboro St. Frisco, TX 75035	Interest rate 0.00
		Maturity date 06/01/2023
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral none		Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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:		2 FILER NAME Angela Dunford			3 Filer ID (Ethics Commission Filers)		
4 Date 02/21/2022		5 Payee name CampaignPros.com					
6 Amount (\$) 817.50		7 Payee address: 5200 30th St. SW			City: Davenport,	State: IA	Zip Code 52802
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense			(b) Description Yard Signs			
	(c) Check if travel outside of Texas. Complete Schedule T.			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 02/22/2022		Payee name CampaignPros.com					
Amount (\$) 118.00		Payee address: 5200 30th St. SW			City: Davenport,	State: IA	Zip Code 52802
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense			Description Stakes for yard signs			
	Check if travel outside of Texas. Complete Schedule T.			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 02/22/2022		Payee name FedEx Office Print & Ship Center					
Amount (\$) 92.00		Payee address: 8290 State Hwy 121			City: Frisco,	State: TX	Zip Code 75034
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense			Description Push cards			
	Check if travel outside of Texas. Complete Schedule T.			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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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:		2 FILER NAME Angela Dunford		3 Filer ID (Ethics Commission Filers)	
4 Date 03/04/2022		5 Payee name Collin County			
6 Amount (\$) 28.06		7 Payee address; 2010 Redbud Blvd. Suite 102		City; McKinney,	State; TX
				Zip Code 75069	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Voter registration list		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 03/08/2022		Payee name First Graphic Services			
Amount (\$) 1,154.49		Payee address; 229 Garvon St.		City; Garland,	State; TX
				Zip Code 75040	
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Roadside signs		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 03/09/2022		Payee name Tractor Supply Co.			
Amount (\$) 513.09		Payee address; 3350 North Central Expy US 75		City; McKinney,	State; TX
				Zip Code 75071	
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description T-Posts & post pounder		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY 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

If the requested information is not applicable, DO NOT include this page in the report.

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: 3	2 FILER NAME Angela Dunford	3 Filer ID (Ethics Commission Filers)
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4 Date 03/12/2022	5 Payee name Donut Delite
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6 Amount (\$) 35.15	7 Payee address; 7333 Coit Rd #120	City; Frisco,	State; TX	Zip Code 75035
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Donuts for roadside sign volunteers
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 03/16/2022	Payee name Karmic Grounds
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Amount (\$) 100.00	Payee address; 7227 Main St Suite 600	City; Frisco,	State; TX	Zip Code 75034
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Event reservation fee
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 03/19/2022	Payee name UPrinting.com
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Amount (\$) 176.34	Payee address; 8000 Haskell Ave	City; Van Nuys,	State; CA	Zip Code 91406
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Push Cards
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED