

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	<div style="border: 2px solid black; padding: 5px;"> <p>OFFICE USE ONLY</p> <p>Date Received</p> <p style="font-size: 2em; color: blue;">FILED</p> <p style="font-size: 1.5em; color: blue;">2022 FEB 22 PM 4:32</p> <p>JOHN F. PARKER COUNTY CLERK DALLAS COUNTY</p> <p>BY _____ DEPUTY</p> <p>Date Hand-delivered or Date Postmarked</p> <p>Receipt # _____ Amount \$ _____</p> <p>Date Processed</p> <p>Date Imaged</p> </div>			
	MRS.	FELICIA	A				
NICKNAME	LAST	SUFFIX					
	PITRE						
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE						
	P.O. BOX 71042 DALLAS, TEXAS 75371						
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(214)	304-8542					
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI				
	MR.	GARY	J.				
NICKNAME	LAST	SUFFIX					
	FITZSIMMONS						
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE						
	1919 FERNDALE AVE. DALLAS, TEXAS 75224						
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(214)	641-1531					
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)						
	<input type="checkbox"/> July 15 <input checked="" 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	THROUGH	Month	Day	Year
	1	21	22		2	19	22
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	Other Description	
	3	1	22	<input type="checkbox"/> General	<input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)			
	DISTRICT CLERK			DISTRICT CLERK			
14 NOTICE FROM POLITICAL COMMITTEE(S) <small>Additional Pages</small>	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					
	GENERAL	COMMITTEE ADDRESS					
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRESS					

GO TO PAGE 2

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. ■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,221.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$
5. ■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 10,926.30
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	\$ 496.00
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: 7
2 FILER NAME FELICIA PITRE		3 Filer ID (Ethics Commission Filers)
4 Date 02/07/2022	5 Full name of contributor out-of-state PAC (ID#: _____) HELEN GIDDINGS 6 Contributor address; City; State; Zip Code 400 S. ZANG BLVD., STE., 108, DALLAS, TEXAS 75208	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/09/2022	Full name of contributor out-of-state PAC (ID#: _____) HARRY ROBINSON Contributor address; City; State; Zip Code P.O. BOX 150157, DALLAS, TEXAS 75135	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2022	Full name of contributor out-of-state PAC (ID#: _____) KATY HUBENER Contributor address; City; State; Zip Code 400 N. MAIN ST., DUNCANVILLE, TEXAS 75116	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2022	Full name of contributor out-of-state PAC (ID#: _____) TODD HILL Contributor address; City; State; Zip Code 707 VERMOND AVE., DALLAS, TEXAS 75216	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: 7
2 FILER NAME FELICIA PITRE		3 Filer ID (Ethics Commission Filers)
4 Date 02/09/2022	5 Full name of contributor out-of-state PAC (ID# _____) ROD GIVENS 6 Contributor address; City; State; Zip Code 6200 LOS ROBLES LN., MESQUITE, TEXAS 75150	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2022	Full name of contributor out-of-state PAC (ID# _____) CAROL DONOVAN Contributor address; City; State; Zip Code 6509 MALCOLM DR., DALLAS, TEXAS 75214	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2022	Full name of contributor out-of-state PAC (ID# _____) HARRYETTE EHRHARDT Contributor address; City; State; Zip Code 5731 SWISS AVE., DALLAS, TEXAS 75214	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2022	Full name of contributor out-of-state PAC (ID# _____) JAY DUNN Contributor address; City; State; Zip Code 1711 E. RED BIRD LN., DALLAS, TEXAS 75241	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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2 FILER NAME FELICIA PITRE		3 Filer ID (Ethics Commission Filers)
4 Date 02/15/2022	5 Full name of contributor out-of-state PAC (ID#: _____) DOROTHY BURTON 6 Contributor address; City; State; Zip Code 1723 BEAVER CREEK DR., DUNCANVILLE, TEXAS 75137	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/15/2022	Full name of contributor out-of-state PAC (ID#: _____) BUCKLEY CHAPPELL Contributor address; City; State; Zip Code 1581 FM. 740 S., FORNEY, TEXAS 75216	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2022	Full name of contributor out-of-state PAC (ID#: _____) DEMETRIS SAMPSON Contributor address; City; State; Zip Code P.O. BOX 763834, DALLAS, TEXAS 75376	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2022	Full name of contributor out-of-state PAC (ID#: _____) JEAN BALL Contributor address; City; State; Zip Code 3615 OAK CREEK CIR., DALLAS, TEXAS 75227	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME FELICIA PITRE		3 Filer ID (Ethics Commission Filers)
4 Date 02/16/2022	5 Full name of contributor out-of-state PAC (ID#: _____) PAUL STAFFORD 6 Contributor address; City; State; Zip Code 3142 ROSS AVE., #1, DALLAS, TEXAS 75204	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/17/2022	Full name of contributor out-of-state PAC (ID#: _____) GERALD BROWN Contributor address; City; State; Zip Code 1655 N. ST. AUGUSTINE DR., DALLAS, TEXAS 75217	Amount of contribution (\$) 60.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2022	Full name of contributor out-of-state PAC (ID#: _____) LAUREN WITHERSPOON Contributor address; City; State; Zip Code 8601 PARK LN., APT. 214, DALLAS, TEXAS 75231	Amount of contribution (\$) 26.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2022	Full name of contributor out-of-state PAC (ID#: _____) ANNETTE KRAUSSE Contributor address; City; State; Zip Code 5346 LONGVIEW ST., DALLAS, TEXAS 75206	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME FELICIA PITRE		3 Filer ID (Ethics Commission Filers)
4 Date 02/17/2022	5 Full name of contributor out-of-state PAC (ID#: _____) JOAN SMOTZER 6 Contributor address; City; State; Zip Code 3030 MCKINNEY AVE., APT. 1803, DALLAS, TEXAS 75204	7 Amount of contribution (\$) 300.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/17/2022	Full name of contributor out-of-state PAC (ID#: _____) DIANE RAGSDALE Contributor address; City; State; Zip Code 3611 DUNBAR ST., DALLAS, TEXAS 75215	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2022	Full name of contributor out-of-state PAC (ID#: _____) OMAR JIMENEZ Contributor address; City; State; Zip Code 1638 CEDAR BLUFF LN., DALLAS, TEXAS 75253	Amount of contribution (\$) 35.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2022	Full name of contributor out-of-state PAC (ID#: _____) KATHY NEALY Contributor address; City; State; Zip Code 5604 LEWIS ST., APT. I, DALLAS, TEXAS 75206	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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2 FILER NAME FELICIA PITRE		3 Filer ID (Ethics Commission Filers)
4 Date 02/17/2022	5 Full name of contributor out-of-state PAC (ID#: _____) RANDALL BRYANT 6 Contributor address; City; State; Zip Code 2420 CANTON ST., #6308, DALLAS, TEXAS 75201	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/17/2022	Full name of contributor out-of-state PAC (ID#: _____) HASANI BURTON Contributor address; City; State; Zip Code 5334 BEXAR ST., DALLAS, TEXAS 75215	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2022	Full name of contributor out-of-state PAC (ID#: _____) DR. PAMELA GRAYSON Contributor address; City; State; Zip Code 5207 GROVEWOOD ST., DALLAS, TEXAS 75210	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2022	Full name of contributor out-of-state PAC (ID#: _____) WESLEY LUE Contributor address; City; State; Zip Code 1901 CENTENARY DR., RICHARDSON, TEXAS 75081	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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2 FILER NAME FELICIA PITRE		3 Filer ID (Ethics Commission Filers)
4 Date 02/19/2022	5 Full name of contributor out-of-state PAC (ID#: _____) NINA MOUNTIQUE	7 Amount of contribution (\$) 200.00
6 Contributor address; City; State; Zip Code 125 MORNINGSIDE DR., DESOTO, TEXAS 75115		
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)
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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 FELICIA A. PITRE	3 Filer ID (Ethics Commission Filers)
4 Date 01/21/2022	5 Payee name OFFICE DEPOT	
6 Amount (\$) 194.85	7 Payee address; City; State; Zip Code 2415 N. HASKELL AVE., DALLAS, TEXAS 75204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OFFICE OVERHEAD	(b) Description OFFICE SUPPLIES
	(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

Date 01/25/2022	Payee name REILLY ECHOLS PRINTING. INC.	
Amount (\$) 4,968.68	Payee address; City; State; Zip Code 1710 S. HARWOOD ST., DALLAS, TEXAS 75215	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) PRINTING EXPENSE	Description PUSHCARDS
	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 FELICIA PITRE	Office sought Office held DISTRICT CLERK DISTRICT CLERK

Date 02/04/2022	Payee name USPS	
Amount (\$) 2.76	Payee address; City; State; Zip Code 401 TOM LANDRY HWY.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OFFICE OVERHEAD	Description ENVELOPE
	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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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 FELICIA A. PITRE	3 Filer ID (Ethics Commission Filers)
4 Date 02/09/2022	5 Payee name AMAC PRODUCTIONS, EVANS & DAVIS PLLC.	
6 Amount (\$) 2,500.00	7 Payee address; City; State; Zip Code 2707 HIBERNIAN ST.	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description RADIO ADVERTISING
	(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 FELICIA PITRE	Office sought DISTRICT CLERK
		Office held DISTRICT CLERK
Date 02/10/2022	Payee name BEYOND THE SLOGAN CONSULTING	
Amount (\$) 2,000.00	Payee address; City; State; Zip Code 2710 ROUTH CREEK PKWY., APT. 4210, RICHARDSON, TEXAS 75082	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description TEXTING
	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 FELICIA PITRE	Office sought DISTRICT CLERK
		Office held DISTRICT CLERK
Date 02/11/2022	Payee name EDWARDS AND PATTERSON SIGNS	
Amount (\$) 1,326.22	Payee address; City; State; Zip Code 203 S. BELTLINE RD., IRVING, TEXAS 75060	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) PRINTING EXPENSE	Description 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 FELICIA PITRE	Office sought DISTRICT CLERK
		Office held DISTRICT CLERK

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: 3	2 FILER NAME FELICIA A. PITRE	3 Filer ID (Ethics Commission Filers)
4 Date 02/15/2022	5 Payee name OFFICE DEPOT	
6 Amount (\$) 23.79	7 Payee address; City; State; Zip Code 2415 N. HASKELL AVE., DALLAS, TEXAS 75204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OFFICE OVERHEAD	(b) Description OFFICE SUPPLIES
	(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	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	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	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	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 PERSONAL FUNDS

SCHEDULE G

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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 G: 1	2 FILER NAME FELICIA A. PITRE	3 Filer ID (Ethics Commission Filers)
4 Date 02/09/2022	5 Payee name AFRICAN AMERICAN MUSEUM	
6 Amount (\$) 496.00 <small>Reimbursement from political contributions intended</small>	7 Payee address; City; State; Zip Code P.O. BOX 750157, DALLAS, TEXAS 75315	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FUNDRAISING EXPENSE	(b) Description VENUE RENTAL
	(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 FELICIA PITRE	Office sought DISTRICT CLERK
		Office held DISTRICT CLERK
Date	Payee name	
Amount (\$) <small>Reimbursement from political contributions intended</small>	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	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	Payee name	
Amount (\$) <small>Reimbursement from political contributions intended</small>	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	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

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