

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)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,445.
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 5609.20 5,292.96
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 11,194.19
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

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.

[Handwritten Signature]

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Carla Gilkey this the 18th day of January, 2020, to certify which, witness my hand and seal of office.

[Signature] Signature of officer administering oath
Carla Gilkey Printed name of officer administering oath
Notary Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
 (street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
 (month) (year)

Signature of Candidate/Officeholder (Declarant)

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		\$ 7,445.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 2,662.95
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0
4. <input type="checkbox"/> SCHEDULE E: LOANS		\$ 0
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 5,280.00 5609.20
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$ 0
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ 0
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$ 0
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 0
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$ 0

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:
2 FILER NAME Carmen P. White		3 Filer ID (Ethics Commission Filers)
4 Date 07/15/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Lakesha Smith	7 Amount of contribution (\$) 100.00
	6 Contributor address; City; State; Zip Code 11300 N. Central Expy #602 Dallas, TX 75243	
8 Principal occupation / Job title (See Instructions) <i>Laurel</i>		9 Employer (See Instructions) <i>Law Office Lakesha Smith</i>
Date 07/15/2021	Full name of contributor out-of-state PAC (ID#: _____) Alicia Wilson	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 1106 Sicily Dr. Garland, TX 75040	
Principal occupation / Job title (See Instructions) <i>Executive Assistant</i>		Employer (See Instructions) <i>Dallas Cowboys</i>
Date 07/15/2021	Full name of contributor out-of-state PAC (ID#: _____) Chasity Gilland	Amount of contribution (\$) 25.00
	Contributor address; City; State; Zip Code 7521 Fairfield Dr. Rowlett, TX 75089	
Principal occupation / Job title (See Instructions) <i>unemployed</i>		Employer (See Instructions) <i>unemployed</i>
Date 01/17/2022	Full name of contributor out-of-state PAC (ID#: _____) Evette Hayslett	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 4202 Baystone Ct. Rowlett, TX 75088	
Principal occupation / Job title (See Instructions) <i>Project Management</i>		Employer (See Instructions) <i>Ribbon Communications</i>

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:
2 FILER NAME Carmen P. White		3 Filer ID (Ethics Commission Filers)
4 Date 07/11/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Amanda Griffith	7 Amount of contribution (\$) 100.00
	6 Contributor address; City; State; Zip Code 2223 Beach St. Apt.411 San Dlego, CA 92101	
8 Principal occupation / Job title (See Instructions) <i>Attorney</i>		9 Employer (See Instructions) <i>U.S. Attorney's Office</i>
Date 07/09/2021	Full name of contributor out-of-state PAC (ID#: _____) Ugalahi Offoboche	Amount of contribution (\$) 50.00
	Contributor address; City; State; Zip Code 3519 Delford Circle Dallas, TX 75228	
Principal occupation / Job title (See Instructions) <i>Lange</i>		Employer (See Instructions) <i>Law Office Ugalahi Offoboche</i>
Date 07/10/2021	Full name of contributor out-of-state PAC (ID#: _____) Marc Fellman	Amount of contribution (\$) 250.00
	Contributor address; City; State; Zip Code 4131 N. Central Expressway # 900 Dallas, TX 75204	
Principal occupation / Job title (See Instructions) <i>Lange</i>		Employer (See Instructions) <i>Law Office of Marc Fellman</i>
Date 07/10/2021	Full name of contributor out-of-state PAC (ID#: _____) Toby Shook	Amount of contribution (\$) 750.00
	Contributor address; City; State; Zip Code 2001 Bryan St. #1905 Dallas, TX 75201	
Principal occupation / Job title (See Instructions) <i>Lange</i>		Employer (See Instructions) <i>Law Office of Toby Shook</i>

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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:
2 FILER NAME Carmen P. White		3 Filer ID (Ethics Commission Filers)
4 Date 07/12/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Kenneth Weatherspoon 6 Contributor address; City; State; Zip Code 325 N. St. Paul Street Suite 2475 Dallas, TX 75201	7 Amount of contribution (\$) 150.00
8 Principal occupation / Job title (See Instructions) <i>Lawyer</i>		9 Employer (See Instructions) <i>Law Office of Kenneth Weatherspoon</i>
Date 07/13/2021	Full name of contributor out-of-state PAC (ID#: _____) Danielle Uher Contributor address; City; State; Zip Code 8301 Lakeview Pkwy, Ste 111-143 Rowlett, TX 75088	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) <i>Lawyer</i>		Employer (See Instructions) <i>Law Office of Danielle Uher</i>
Date 07/13/2021	Full name of contributor out-of-state PAC (ID#: _____) William Cox III Contributor address; City; State; Zip Code 325 N. St. Paul, Suite 2100 Dallas, TX 75201	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions) <i>Lawyer</i>		Employer (See Instructions) <i>Law Office of William Cox</i>
Date 07/15/2021	Full name of contributor out-of-state PAC (ID#: _____) Chris Lewis Contributor address; City; State; Zip Code 2101 Cedar Springs Rd, Suite 1900 Dallas, TX 75201	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions) <i>Lawyer</i>		Employer (See Instructions) <i>Law Office of Chris Lewis</i>

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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:
2 FILER NAME Carmen P. White		3 Filer ID (Ethics Commission Filers)
4 Date 07/15/2021	5 Full name of contributor Shannon DeVaughn out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 1032 Hollyburne Ave. Menlo Park, CA 94025	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See Instructions) <i>Lawyer - unemployed</i>		9 Employer (See Instructions) <i>unemployed</i>
Date 07/15/2021	Full name of contributor Stanley Mays out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 400 N. St Paul St. Dallas, TX 75201	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) <i>Lawyer</i>		Employer (See Instructions) <i>Law office of Stanley Mays</i>
Date 07/15/2021	Full name of contributor Somya Blocker out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 456 San Gabriel Way Sunnyvale, TX 75182	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) <i>Lawyer</i>		Employer (See Instructions) <i>Dallas County</i>
Date 07/15/2021	Full name of contributor Jeanette Hollingsworth out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 3726 Cauthorn Dr. Dallas, TX 75210	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) <i>Court Coordinator</i>		Employer (See Instructions) <i>Dallas County District Ct. 291st</i>

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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:
2 FILER NAME Carmen P. White		3 Filer ID (Ethics Commission Filers)
4 Date 07/14/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Randall Isenberg	7 Amount of contribution (\$) 2,000.00
6 Contributor address; City; State; Zip Code 4303 N. Central Expy Dallas, TX 75205		
8 Principal occupation / Job title (See Instructions) <i>Lawyer</i>		9 Employer (See Instructions) <i>Law office of Randall Isenberg</i>
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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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Carmen P. White		3 Filer ID (Ethics Commission Filers)
4 Date 07/22/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Jennifer Castillo 6 Contributor address; City; State; Zip Code 6934 Rocky Top Circle Dallas, TX 75252	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions) <i>Lawyer</i>		9 Employer (See Instructions) <i>Law Office of Jennifer Castillo</i>
Date 11/15/2021	Full name of contributor out-of-state PAC (ID#: _____) Greg Schaub Contributor address; City; State; Zip Code 3440 Normandy Ave. Dallas, TX 75205	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) <i>unemployed</i>		Employer (See Instructions) <i>unemployed</i>
Date 07/25/2021	Full name of contributor out-of-state PAC (ID#: _____) Warren Abrams Contributor address; City; State; Zip Code 10300 N. Central Expy Ste 283 Dallas, TX 75231	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) <i>Lawyer</i>		Employer (See Instructions) <i>Law Office of Warren Abrams</i>
Date 07/18/2021	Full name of contributor out-of-state PAC (ID#: _____) Brenda Kinard Contributor address; City; State; Zip Code 2514 Limestone Ln. Garland, TX 75040	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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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 Carmen P. White		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 2,662.95	
5 Date 07/05/2021	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black Family Good Governance 7 Contributor address; City; State; Zip Code 1309B W. Abram St., 200 Arlington, TX 76013	8 Amount of Contribution \$ 2,662.95	9 In-kind contribution description Host Campaign Fundraiser Event <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) Domestic Nonprofit Corporation		13 Contributor's job title (FOR JUDICIAL)(See Instructions) Director	
14 Contributor's employer/law firm (FOR JUDICIAL) Domestic Nonprofit Corporation		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) NA	
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
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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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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Carmen P. White	3 Filer ID (Ethics Commission Filers)
4 Date 12/13/22 01/13/2021	5 Payee name Dallas County Democrat Party	
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 1414 N. Washington Ave., Dallas, TX 75204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense/Event Expense	(b) Description Advertisement for a Party Event
	(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 12/02/2021	Payee name Olivia Segura Gregory	
Amount (\$) 200.00	Payee address; City; State; Zip Code 1617 Plantation Rd., Garland, TX 75044	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Notary for Petitions
	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 12/02/2021	Payee name La Bella Italian Grill	
Amount (\$) 132.82	Payee address; City; State; Zip Code 4125 Broadway Blvd., Garland, TX 75043	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Petition gathering, notarizing event for campaign volunteers
	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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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 Carmen P. White	3 Filer ID (Ethics Commission Filers)
4 Date 10/12/2021	5 Payee name Pose 360 LLC	
6 Amount (\$) 15.00	7 Payee address; City; State; Zip Code 120 S. Westmoreland Rd. #6307 Deoto, TX 75115	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description 360 Campaign Photo
	(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 11/12/2021	Payee name UPS Store 4897	
Amount (\$) 15.00	Payee address; City; State; Zip Code 8301 Lakeview Pkwy Ste 111, Rowlett, TX 75088	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Stamps
	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 11/10/2021	Payee name FiitgshopCo	
Amount (\$) 59.93	Payee address; City; State; Zip Code fiitg@hotmail.com	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Campaign Jersey
	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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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 Carmen P. White	3 Filer ID (Ethics Commission Filers)
4 Date 12/05/22 01/17/2022	5 Payee name Wal-Mart	
6 Amount (\$) 41.41	7 Payee address; City; State; Zip Code Walmart.com	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Gift bags w/ Labels.
	(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 12/06/2021	Payee name Dallas County Democratic Party	
Amount (\$) 2,500.00	Payee address; City; State; Zip Code 1414 N. Washington Ave., Dallas TX 75204	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Campaign Filing Fee
	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 12/06/2021	Payee name Chase Bank	
Amount (\$) 15.00	Payee address; City; State; Zip Code 900 W. Rusk St Rockwall, TX 75087	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fee	Description Money Order to pay filing fee
	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 Carmen P. White	Office sought Office held Judge DCCC 8 Judge DCCC 8

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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:	2 FILER NAME Carmen P. White	3 Filer ID (Ethics Commission Filers)
4 Date 07/07/2021	5 Payee name Avery Pearson	
6 Amount (\$) 125.00	7 Payee address; City; State; Zip Code 23 24 Limestone Ln. Garland, TX 75040	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Creation of Campaign Material/Cards
	(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 07/19/2021	Payee name Mary Ann Scroggins	
Amount (\$) 200.00	Payee address; City; State; Zip Code 5305 McClellan Dr., Little Rock, Arkansas 72209	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Draft and mail thank you cards for donors.
	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 09/04/2021	Payee name Walmart	
Amount (\$) 190.69	Payee address; City; State; Zip Code 2501 Lakeview Pkwy, Rowlett, TX 75088	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense and Advertising Expense	Description Food and beverage and advertising for Labor Day Picnic + Tent
	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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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 | | | |

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1 Total pages Schedule F1:	2 FILER NAME Carmen P. White	3 Filer ID (Ethics Commission Filers)
4 Date 07/30/2021	5 Payee name Vistaprint	
6 Amount (\$) 58.22	7 Payee address; City; State; Zip Code Vistaprint.com	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Thank You Cards and envelopes
	(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 Carmen P. White	Office sought Judge DCCC 8
		Office held Judge DCCC 8
Date 08/26/2021	Payee name Amazon	
Amount (\$) 68.08	Payee address; City; State; Zip Code Amazon.com	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense/Event Expense	Description Stickers and Bottles for Hand Sanitizer for picnic
	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 Carmen P. White	Office sought Judge DCCC 8
		Office held Judge DCCC 8
Date 08/30/2021	Payee name Stickers and Banners	
Amount (\$) 156.11	Payee address; City; State; Zip Code 3770 Peachtree Crest Dr. Duluth, GA 30097	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Standing Campaign Sign
	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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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 Carmen P. White	3 Filer ID (Ethics Commission Filers)
4 Date 08/14/2021	5 Payee name Dallas County Democratic Party	
6 Amount (\$) \$ 100	7 Payee address; City; State; Zip Code 1414 N. Washington Ave., Dallas, Tx 75204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Party Campaign Event fee
	(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

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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 Carmen P. White	3 Filer ID (Ethics Commission Filers)
4 Date 12/05/2021	5 Payee name Walmart	
6 Amount (\$) 41.41	7 Payee address; City; State; Zip Code Walmart.com	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Gift Bags with Campaign Stickers
	(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 Carmen P. White	Office sought Judge DCCC 8
		Office held Judge DCCC 8
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

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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 Carmen P. White	3 Filer ID (Ethics Commission Filers)
4 Date 07/15/2021	5 Payee name Sherrell Adams	
6 Amount (\$) 233.33	7 Payee address; City; State; Zip Code 6303 Frisco Square Blvd. Apt 345 Frisco, TX 75034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description DJ
	(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 Carmen P. White	Office sought Judge DCCC 8
		Office held Judge DCCC 8
Date 07/15/2021	Payee name Tavia Whitlowe	
Amount (\$) 100.00	Payee address; City; State; Zip Code 1430 Dragon Ste 19 Dallas, TX 75207	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Photographer
	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 Carmen P. White	Office sought DCCC 8
		Office held DCCC 8
Date 07/15/2021	Payee name DeDe McGuire	
Amount (\$) 133.33	Payee address; City; State; Zip Code 2221 E. Lamar Blvd. Ste 400 Arlington, TX 76006	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Host
	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 Carmen P. White	Office sought DCCC 8
		Office held DCCC 8

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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 Carmen P. White	3 Filer ID (Ethics Commission Filers)
4 Date 08/26/2021	5 Payee name 24HourWrist Band	
6 Amount (\$) 156.26	7 Payee address; City; State; Zip Code 23hourwristbands.com	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Adverstising Expense	(b) Description Can Koozies
	(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 Carmen P. White	Office sought Judge DCCC 8
		Office held Judge DCCC 8
Date 09/03/2021	Payee name Staples	
Amount (\$) 32.46	Payee address; City; State; Zip Code 1009 E Interstate I30	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Campaign Stickers to go on Sanitizer Bottles
	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 10/18/2021	Payee name Lake Highlands Democratic Club	
Amount (\$) 25.00	Payee address; City; State; Zip Code www.lhwrdemocrats.org	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Chili Super
	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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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 Carmen P. White	3 Filer ID (Ethics Commission Filers)
4 Date 12/04/2021	5 Payee name Shutterfly, Inc.	
6 Amount (\$) 53.37	7 Payee address; City; State; Zip Code 2800 Bridge Parkway Redwood City, CA 94065	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Cards for Campaign
	(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 Carmen P. White	Office sought Judge DCCC 8
		Office held Judge DCCC 8
Date 08/16/2021	Payee name Adobe Inc.	
Amount (\$) 97.38 81.15	Payee address; City; State; Zip Code 345 Park Ave. San Jose, CA 95110-2704	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Monthly fee for Electronic Doc	Description Adobe Sign Electronic Doc
	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 Carmen P. White	Office sought Judge DCCC 8
		Office held Judge DCCC 8
Date 07/01/2021	Payee name Co-Merica Bank	
Amount (\$) 34.75	Payee address; City; State; Zip Code 4950 N. Garland Ave., Garland, TX 75040	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Banking Expense	Description Banking Account Fees
	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 Carmen P. White	Office sought Judge DCCC 8
		Office held Judge CCC 8

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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 Carmen P. White	3 Filer ID (Ethics Commission Filers)
4 Date 12/07/2021	5 Payee name Shutterfly, Inc.	
6 Amount (\$) 53.37	7 Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description
	(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 Carmen P. White	Office sought Judge DCCC 8
		Office held Judge DCCC 8
Date 12/08/2021	Payee name FedEX Office	
Amount (\$) 48.06	Payee address; City; State; Zip Code 3905 Oak Lawn Ave. Suite 110, Dallas, TX 75219	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing/Copying Expense	Description Copy of Filing Petitions
	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 Carmen P. White	Office sought Judge DCCC 8
		Office held Judge DCCC 8
Date 12/31/2021	Payee name United States Postal Service	
Amount (\$) 134.00	Payee address; City; State; Zip Code 3416 Enterprise Dr., Rowlett, TX 75088	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Fees post office box
	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 Carmen P. White	Office sought Judge DCCC 8
		Office held Judge DCCC 8

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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 Carmen P. White	3 Filer ID (Ethics Commission Filers)
4 Date 07/15/2021	5 Payee name Sign Art Etc.	
6 Amount (\$) 38.35	7 Payee address; City; State; Zip Code 181 Sagamore Pkwy S B Lafayette, INn 47905	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Back Drop/ Step and Repeat
	(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 Carmen P. White	Office sought Judge DCCC 8
		Office held Judge DCCC 8
Date 07/15/2021	Payee name Shay Hopkins	
Amount (\$) 6.00	Payee address; City; State; Zip Code 2400 S. Hampton Rd. # 9304 Glenn Heights, TX 75154	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement/Event Expense	Description Campaign Fundraiser Shirts
	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 Carmen P. White	Office sought Judge DCCC 8
		Office held Judge DCCC 8
Date 10/15/2021	Payee name Alpha Phi Alpha CC. Russesau Scholarship Gala	
Amount (\$) 103.20	Payee address; City; State; Zip Code 2201 N. Stemmons Fwy Dallas, TX 75207	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Attend Scholarship Banquet and Advertisement
	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 Carmen P. White	Office sought DCCC 8
		Office held DCCC 8

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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 Carmen P. White	3 Filer ID (Ethics Commission Filers)
4 Date 11/22/2021	5 Payee name Democrat Monthly Magazine	
6 Amount (\$) 200.00	7 Payee address; City; State; Zip Code 1910 Pacific Ave Suite, 14220 Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Ad
	(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 Carmen P. White	Office sought Judge DCCC 8
		Office held Judge DCCC 8
Date 11/10/2021	Payee name Donna Miller: Southwest Dallas/Desoto NCNW	
Amount (\$) 100.00	Payee address; City; State; Zip Code ncnw.org	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Advertising/Gift Thanksgiving
	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 Carmen P. White	Office sought Judge DCCC 8
		Office held Judge DCCC8
Date 10/16/2022	Payee name Alpha Phi Alpha CC Russesau Scholarship Gala	
Amount (\$) 16.24	Payee address; City; State; Zip Code 2201 N. Stemmons Fwy Dallas, TX 75207	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Beverage	Description Campaign Event
	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 Carmen P. White	Office sought DCCC 8
		Office held DCCC 8

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