

FORM C/OH
COVER SHEET PG 1

Revised 11/15/2022

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

15 C/OH NAME John W Price		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)	\$.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 118,113.33
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 1,400.85
	4. TOTAL POLITICAL EXPENDITURES	\$ 96,996.97
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 180,873.54
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$.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.



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 _____, 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	\$\$118,113.33
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$\$0.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$\$0.00
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$\$0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$\$94,195.27
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$\$0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$\$0.00
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$\$2,801.70
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$\$0.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$\$0.00
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$\$0.00
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$\$0.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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: 26
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 03/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doc's Bail Bond 6 Contributor address; City; State; Zip Code 163 Pittsburg St A2 Dallas TX 75207	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Bail Service		9 Employer (See Instructions)
Date 03/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen Monroe or Monroe Farms Contributor address; City; State; Zip Code #1 Stonebriar Way Frisco TX 75034	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 04/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig Evans Contributor address; City; State; Zip Code PO Box 25131 Dallas TX 75225	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 04/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd Jones Contributor address; City; State; Zip Code 3521 Green Acres Ter Farmers TX 75234 Brock	Amount of contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Self Employed		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.		

RECEIVED FOR FILING
ELECTIONS DEPARTMENT
DALLAS, TEXAS
2024 JUL 17 PM 1:21

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report. 21

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 26
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harry McCalla 6 Contributor address; City; State; Zip Code 15729 Nedra Way Dallas TX 75248	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Retired
Date 04/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucious L Williams Revocable Trust Contributor address; City; State; Zip Code 1421 Covington Drive Desoto TX 75115	Amount of contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karin Petties Contributor address; City; State; Zip Code 5161 Chalet Lane Dallas TX 75232	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Prism
Date 04/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pete Schenkel Contributor address; City; State; Zip Code 614 N. Bishop Ste 3 Dallas TX 75208	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Dairy Farms
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: 26
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Raymond Murray 6 Contributor address; City; State; Zip Code 720 N. Post Oak Rd, #138 Houston TX 77024	7 Amount of contribution (\$) \$4,960.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Self
Date 04/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) William Kramer Contributor address; City; State; Zip Code 2626 Howell St, 10th Floor Dallas TX 75204	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joycelyn Johnson Contributor address; City; State; Zip Code 521 Missionary Ridge Desoto TX 75115	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Staff		Employer (See Instructions) 23rd Senate
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roy Gene Evans Contributor address; City; State; Zip Code PO Box 25251 Dallas TX 75225	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Sel		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: 26
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Victor Elmore 6 Contributor address; City; State; Zip Code 1408 Riverfront Blvd Dallas TX 75207	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) self employed
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carl Sheperd Contributor address; City; State; Zip Code PO Box 202268 Arlington TX 76008	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mildred & Clifford Sparks Contributor address; City; State; Zip Code 3994 Sword Dancer Way Grand PRairie TX 75052	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mavis & Marcus Knight Contributor address; City; State; Zip Code 6108 Red Bird Lane Dallas TX 75232	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired/Self Employed		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:
26

2 FILER NAME
John W Price

3 Filer ID (Ethics Commission Filers)

4 Date
04/29/2024

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Phil & Judy Fisher

7 Amount of contribution (\$)
\$100.00

6 Contributor address; City; State; Zip Code
5002 Billingsay Rd Seogoville TX 75159

8 Principal occupation / Job title (See Instructions)
Bailiff

9 Employer (See Instructions)
County

Date
04/29/2024

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Rufus & Bernadetta Green

Amount of contribution (\$)
\$150.00

Contributor address; City; State; Zip Code
3608 Kirkfield The Colony TX 75056

Principal occupation / Job title (See Instructions)
Doctor

Employer (See Instructions)

Date
04/29/2024

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

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

Contributor address; City; State; Zip Code
9239 Hathaway Dallas TX 75220

Principal occupation / Job title (See Instructions)
Self Employed

Employer (See Instructions)

Date
04/29/2024

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

Amount of contribution (\$)
\$300.00

Contributor address; City; State; Zip Code
2913 S Houston School Rd Lancaster TX 75146

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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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:
26

2 FILER NAME
John W Price

3 Filer ID (Ethics Commission Filers)

4 Date
04/29/2024

5 Full name of contributor ☐ out-of-state PAC (ID#:
Ann Gibson

7 Amount of contribution (\$)
\$150.00

6 Contributor address; City; State; Zip Code
2110 Texas Ash Dr Irving TX 75063

8 Principal occupation / Job title (See Instructions)
Retired

9 Employer (See Instructions)

Date
04/29/2024

Full name of contributor ☐ out-of-state PAC (ID#:
Pauline Medrano

Amount of contribution (\$)
\$250.00

Contributor address; City; State; Zip Code
2346 Douglas Dallas TX 75219

Principal occupation / Job title (See Instructions)
Treasurer

Employer (See Instructions)
Dallas County

Date
04/29/2024

Full name of contributor ☐ out-of-state PAC (ID#:
Craig Schenkel

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

Contributor address; City; State; Zip Code
3105 Stanford Ave Dallas TX 75225

Principal occupation / Job title (See Instructions)
Self

Employer (See Instructions)

Date
04/29/2024

Full name of contributor ☐ out-of-state PAC (ID#:
Michael Rader

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

Contributor address; City; State; Zip Code
PO BOX 249 Colleyville TX 76034

Principal occupation / Job title (See Instructions)
self

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: 26
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobby Waddle 6 Contributor address; City; State; Zip Code 1015 S Cockrell Hill Rd Desoto TX 75115	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edgar & Debra Carter Contributor address; City; State; Zip Code 5603 Oak Falls Cir Dallas TX 75287	Amount of contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Royce West Contributor address; City; State; Zip Code 320 S R L Thornton Frwy Ste Dallas TX 75203 300	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) West & Associates
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony Lyons Contributor address; City; State; Zip Code 320 S R L Thornton Frwy Ste Dallas TX 75203 300	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) West & Associates
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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: 26
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruel Hamilton 6 Contributor address; City; State; Zip Code 324 N St Paul Ste 3350 Dallas TX 75218	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions)
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pete Schenkel Contributor address; City; State; Zip Code 614 N. Bishop Ste 3 Dallas TX 75208	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Dairy Farms
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Nwachukwu Contributor address; City; State; Zip Code 2313 N Masters Dr Dallas TX 75227	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) self		Employer (See Instructions)
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cedric Whitaker Contributor address; City; State; Zip Code 2130 Oak Valley Ln Dallas TX 75232	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self Employed		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: 26
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Printice Gary 6 Contributor address; City; State; Zip Code 16304 Ranchita Drive Dallas TX 75248	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) self employed
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perro Henson, Jr. Contributor address; City; State; Zip Code 2948 Vacherie Lane Dallas TX 75227	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacqueline Ragland Contributor address; City; State; Zip Code 6908 Hunter Cove Dr. Arlington TX 76001	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Adm		Employer (See Instructions)
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbara Bass Bowser Contributor address; City; State; Zip Code 1013 Graceland Desoto TX 75115	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Juvenile		Employer (See Instructions) Dallas County
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**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: 26
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shari Schlachter Krasner <hr/> 6 Contributor address; City; State; Zip Code 5844 Norway Rd Dallas TX 75230	7 Amount of contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) Management		9 Employer (See Instructions) Self
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff Mason <hr/> Contributor address; City; State; Zip Code 517 Palo Duro Circle Desoto TX 75115	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) AGM Properties
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillip Wise <hr/> Contributor address; City; State; Zip Code 4514 Travis Ste 326 Dallas TX 75204	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Exe		Employer (See Instructions) Cienda Partners
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matt & Dolly Angle <hr/> Contributor address; City; State; Zip Code 3616 Rogers Ave Fort Worth TX 76109	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Self Employed		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.		

SCHEDULE A1

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filers)

Revised 11/15/2022

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 26
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leona & Billy Redmon 6 Contributor address; City; State; Zip Code 8351 Country Rd 108 Kaugman TX 75142	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Auto Dealer		9 Employer (See Instructions) Self
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacqueline & Shena Washington Contributor address; City; State; Zip Code 1126 Sandalsood Lane Desoto TX 75115	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Admin		Employer (See Instructions) Dallas County
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betty Tanner Contributor address; City; State; Zip Code 1135 Pinedale Dallas TX 75241	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Louis Lockhardt Contributor address; City; State; Zip Code 1202 Jolly Ennis TX 75119	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) law enforcement		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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2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jonquil Akhir 6 Contributor address; City; State; Zip Code 217 Tessman Tr Hutchins TX 75151	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Self
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Andre Bryd Contributor address; City; State; Zip Code 1730 Richlen Way Desoto TX 75115	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Councilmember		Employer (See Instructions) City of Desoto
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Sheila Tucker Contributor address; City; State; Zip Code 7010 Kira Dallas TX 75227	Amount of contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Medical Assistant		Employer (See Instructions) Dr. Larkin
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Diane Ragsdale Contributor address; City; State; Zip Code 3611 Dunbar Dallas TX 75215	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) ICDC
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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2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin Butler 6 Contributor address; City; State; Zip Code PO BO 277 Lancaster TX 75146	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Construction		9 Employer (See Instructions) Self
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry Hall Contributor address; City; State; Zip Code 4518 Rosebud Rowlett TX 75089	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Technology Systems
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Jones Contributor address; City; State; Zip Code 1527 Bilco Dallas TX 75232	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) JP 1-1		Employer (See Instructions) Dallas County
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joan Smotzer Contributor address; City; State; Zip Code 3030 McKinney Ave #1803 Dallas TX 75204	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Self Employed		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.		

SCHEDULE A1

The Instruction Guide explains how to complete this form.

2 FILER NAME
John W Price

4 Date
04/29/2024

7 Amount of contribution (\$) \$100.00

8	Principal occupation / Job title (See Instructions)
	N/A

Date
04/20/2024

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

Principal occupation / Job title (See Instructions)
CEO

Date
04/20/2024

Amount of contribution (\$) \$500.00

Principal occupation / Job title (See Instructions)
PC

Date
04/29/2024

Amount of contribution (\$) \$500.00

Principal occupation / Job title (See Instructions)
CEO

Employer (See Instructions)
Celanese

Revised 11/15/2022

SCHEDULE A1

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filers)

Employer (See Instructions)

Revised 11/15/2022

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 26
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loren Collins 6 Contributor address; City; State; Zip Code 2443 West 10th St Dallas TX 75211	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Dallas County
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Rideau Contributor address; City; State; Zip Code SWU Box 75-3183 Dallas TX 75275	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig Cunningham Contributor address; City; State; Zip Code 2713 Saltwood Ct Celina TX 75009	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) American Holdings
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jane Heath Contributor address; City; State; Zip Code 6405 Malcolm Dallas TX 75214	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Juvenile Dept		Employer (See Instructions) Dallas County
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

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: 26
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharmarr Singleton Sr. 6 Contributor address; City; State; Zip Code 1900 McKinney Ave Dallas TX 75201	7 Amount of contribution (\$) \$2,700.00
8 Principal occupation / Job title (See Instructions) Founder		9 Employer (See Instructions) Identical Solutions LLC
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Bailey Contributor address; City; State; Zip Code 1811 Meadow Valley Ln Dallas TX 75232	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tre Black Contributor address; City; State; Zip Code 751 Kessler Lake Dr Dallas TX 75208	Amount of contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) On Target Logistics
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack Matthews Contributor address; City; State; Zip Code 320 W Main St Lewisville TX 75057	Amount of contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Southwest
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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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: 26
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 04/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hosea Fain, Jr. 6 Contributor address; City; State; Zip Code 10030 Pebble Valley Ln Dallas TX 75217	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions)
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben Taylor Contributor address; City; State; Zip Code 2654 Lakeforest Court Dallas TX 75214	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ted Lyon & Assoc.
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laura Freeland Contributor address; City; State; Zip Code 6009 Bryan Pkway Dallas TX 75206	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stonewall Democrats Contributor address; City; State; Zip Code PO Box 192305 Dallas TX 75219	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Stonewall Democrats
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filers)

Employer (See Instructions)

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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: 26
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 05/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helen Giddings 6 Contributor address; City; State; Zip Code 400 S Zang Blvd, Ste 1018 Dallas TX 75208	7 Amount of contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Concessionaire
Date 05/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Claire Dewar Contributor address; City; State; Zip Code 5359 Montrose Dr Dallas TX 75209	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Self
Date 05/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan Jones Contributor address; City; State; Zip Code 1783 E Interstate 30 Garland TX 75043	Amount of contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Retail
Date 05/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billie Jo Richards Contributor address; City; State; Zip Code 1518 Bar Harbor Dallas TX 75232	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		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**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: 26
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 05/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark & Karen Walker <hr/> 6 Contributor address; City; State; Zip Code 4150 2nd Ave Dallas TX 75210	7 Amount of contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Walker Auto Body Shop
Date 05/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Knox <hr/> Contributor address; City; State; Zip Code 900 Jackson Dallas TX 75202	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Knox Firm
Date 05/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry Williams <hr/> Contributor address; City; State; Zip Code PO Box 397881 Dallas TX 75339	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Road Supervisor		Employer (See Instructions) Dallas County
Date 05/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valencia Nash-McShann <hr/> Contributor address; City; State; Zip Code 3714 Tioga St Dallas TX 75241	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

SCHEDULE A1

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filers)

Employer (See Instructions)
Keyes Strategies

Revised 11/15/2022

SCHEDULE A1

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filers)

Employer (See Instructions)
Coverall Mgt

Revised 11/15/2022

SCHEDULE A1

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filers)

9	Employer (See Instructions)
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Employer (See Instructions)
self

Employer (See Instructions)
QnetIS

Employer (See Instructions)

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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: 26
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 05/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrie Marshall 6 Contributor address; City; State; Zip Code 12601 Natalie Drive Balch Springs TX 75180	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Mayor		9 Employer (See Instructions) Balck Springs
Date 05/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dianna Broadus Contributor address; City; State; Zip Code 3334 Seevers Ave Dallas TX 75216	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosie Sorrells Contributor address; City; State; Zip Code 5506 Glen Forest Ln Dallas TX 75241	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MMS Company Advertising Specialties LLC Contributor address; City; State; Zip Code 217 N I-35E Desoto TX 75115	Amount of contribution (\$) \$28.33
Principal occupation / Job title (See Instructions)		Employer (See Instructions) MMS Company
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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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 06/20/2024	5 Payee name DonorBox	
6 Amount (\$) \$338.30	7 Payee address; 1520 Belle View Blvd, #4104	City; State; Zip Code Alexandria VA 22307
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) AccountingBanking	(b) Description Fees to process credit card donations
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Commissioner District 3
		Office held Commissioner Distri
Date 06/20/2024	Payee name US Postal Service	
Amount (\$) \$313.97	Payee address; 401 Tom Landry Hwy	City; State; Zip Code Dallas TX 75260
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense	Description US Postal Mailing Service
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Commissioner District 3
		Office held Commissioner Distri
Date 02/25/2024	Payee name MMS Company Advertising Specialties LLC	
Amount (\$) \$3,500.00	Payee address; 217 N I-35E	City; State; Zip Code Desoto TX 75115
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) PollingExpense	Description Political Mailer, Graphic Design, Layout
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Commissioner District 3
		Office held Commissioner Distri

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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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 02/24/2024	5 Payee name MMS Company Advertising Specialties LLC	
6 Amount (\$) \$8,500.00	7 Payee address; City; State; Zip Code 217 N I-35E Desoto TX 75115	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PollingExpense	(b) Description Canvass Program
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Commissioner District 3
		Office held Commissioner Distri
Date 02/26/2024	Payee name Darryl Ayers, Jr.	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 206 Cool Meadow Red Oak TX 75154	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description Photography for political brochure
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Commissioner District 3
		Office held Commissioner Distri
Date 02/25/2024	Payee name Hailee Hall	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 3101 Elder Oaks Dallas TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description Social Media February 2024
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Commissioner District 3
		Office held Commissioner Distri

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 02/28/2024	5 Payee name MMS Company Advertising Specialties LLC	
6 Amount (\$) \$700.00	7 Payee address; 217 N I-35E	City; State; Zip Code Desoto TX 75115
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense	(b) Description Campaign Office Rental February 2024
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Commissioner District 3 Office held Commissioner Distri
Date 02/28/2024	Payee name MMS Company Advertising Specialties LLC	
Amount (\$) \$15,000.00	Payee address; 217 N I-35E	City; State; Zip Code Desoto TX 75115
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) PollingExpense	Description Campaign Greeter Program
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Commissioner District 3 Office held Commissioner Distri
Date 03/05/2024	Payee name MMS Company Advertising Specialties LLC	
Amount (\$) \$6,305.00	Payee address; 217 N I-35E	City; State; Zip Code Desoto TX 75115
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) PrintingExpense	Description Printing of Political signage and push cards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Commissioner District 3 Office held Commissioner Distri

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 03/05/2024	5 Payee name Beyond the Slogan Consulting	
6 Amount (\$) \$4,800.00	7 Payee address; 2710 Routh Creek #4120	City; State; Zip Code Richardson TX 75082
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PollingExpense	(b) Description Voter Text Program
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Commissioner District 3 Office held Commissioner Dist
Date 05/07/2024	Payee name US Postal Service	
Amount (\$) \$204.00	Payee address; 401 Tom Landry Hwy	City; State; Zip Code Dallas TX 75260
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense	Description Stamps for office
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Commissioner District 3 Office held Commissioner Dist
Date 03/08/2024	Payee name Paula Biggurs	
Amount (\$) \$1,450.00	Payee address; 7151 Field View	City; State; Zip Code Dallas TX 75249
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) EventExpense	Description Watch Night Catering
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Commissioner District 3 Office held Commissioner Dist
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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: 18	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 03/22/2024	5 Payee name Tea Cake Kids	
6 Amount (\$) \$318.25	7 Payee address; 217 Tessman Tr City: Hutchins State: TX Zip Code: 75141	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	(b) Description Newborn constituent gifts
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____		
Date 04/17/2024	Payee name Chi Zeta Omega Chapter of Alpha Kappa Alpha Sorority	
Amount (\$) \$200.00	Payee address; 1881 Sinclair Court City: Lewisville State: TX Zip Code: 75067	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description Ad for Journal Support High School Senior
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____		
Date 04/08/2024	Payee name Katherine Hicks Campaign	
Amount (\$) \$1,500.00	Payee address; PO Box 15921 City: Fort Worth State: TX Zip Code: 76119	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo mmittee	Description Contribution
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Katherine Hicks Office sought Tarrant County Commis: Office held N/A		

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