

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

29

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY			
	NICKNAME	LAST	SUFFIX				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
<input type="checkbox"/> Change of Address	PO Box 224725		Dallas	TX	75222		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER		EXTENSION			
	(214 )	762-6992					
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY			
	NICKNAME	LAST	SUFFIX				
		Zan					
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
(Residence or Business)	PO Box 224725			Dallas	TX	75222	
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER		EXTENSION			
	(214 )	762-6992					
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)						
10 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	07	01	2024		12	31	2024
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special			
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)			
	County Commissioner-District #3						
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.						
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS					
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRESS					

GO TO PAGE 2

# 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)

\$ 28,978.11

**EXPENDITURE  
TOTALS**

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE

\$ 1,431.44

4. TOTAL POLITICAL EXPENDITURES

\$ 78,024.71

**CONTRIBUTION  
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  
OF REPORTING PERIOD

\$ 136,622.42

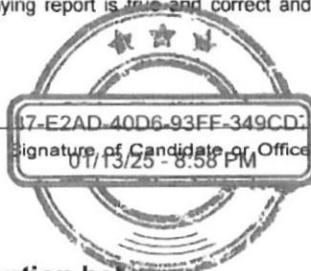
**OUTSTANDING  
LOAN TOTALS**

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.



17-E2AD-40D6-93FF-349CD

Signature of Candidate or Officeholder

**Please complete either option below.**

**(1) Affidavit**

NOTARY STAMP/SEAL

Sworn to and subscribed before me by \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_,

20 \_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is \_\_\_\_\_, 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 SCHEDULESUBTOTAL  
AMOUNT

- |     |                                     |  |               |
|-----|-------------------------------------|--|---------------|
| 1.  | <input checked="" type="checkbox"/> | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      | \$\$28,978.11 |
| 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              | \$\$75,161.83 |
| 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                                      | \$\$2,862.88  |
| 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.		<b>1</b> Total pages Schedule A1: 5
<b>2</b> FILER NAME John W Price		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 07/24/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willis Johnson  <b>6</b> Contributor address; City; State; Zip Code 1001 Belleview #1001 Dallas TX 75215	<b>7</b> Amount of contribution (\$) \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Managemant		<b>9</b> Employer (See Instructions) Self
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) US Postal Service  Contributor address; City; State; Zip Code 401 Tom Landry Hwy Dallas TX 75260-9995	Amount of contribution (\$) \$13.70
Principal occupation / Job title (See Instructions) REFUND		Employer (See Instructions) USPS
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naomi Jackson  Contributor address; City; State; Zip Code 3597 Alaska Ave Dallas TX 75216	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Retired
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Rader  Contributor address; City; State; Zip Code PO Box 249 Colleyville TX 76604	Amount of contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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.

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 5
<b>2</b> FILER NAME John W Price		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Joan E Jackson Bouldin  <b>6</b> Contributor address; City; State; Zip Code 1510 Seevers Ave Dallas TX 75216-1437	<b>7</b> Amount of contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) Self
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Nannie Puryear  Contributor address; City; State; Zip Code 1004 Hanson Way Virginia Bch VA 23454-6045	Amount of contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Self
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: John Benda  Contributor address; City; State; Zip Code 801 Riverfront Blvd Dallas TX 75207	Amount of contribution (\$) \$20,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ken Medlock  Contributor address; City; State; Zip Code 1414 W. Wheatland Rd., Suite 100 Duncanville TX 75116	Amount of contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) CEO/President		Employer (See Instructions) Townview Realtors
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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.

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 5
<b>2</b> FILER NAME John W Price		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kim Phipps For Judge Campaign  <b>6</b> Contributor address; City; State; Zip Code P.O. Box 670213 Dallas TX 75367	<b>7</b> Amount of contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jerry or Sandra Heflin  Contributor address; City; State; Zip Code P. O. Box 518 Rockwall TX 75087	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Self
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: US Postal Service  Contributor address; City; State; Zip Code 401 Tom Landry Hwy Dallas TX 75260	Amount of contribution (\$) \$14.41
Principal occupation / Job title (See Instructions) REFUND		Employer (See Instructions) USPS
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Eric Moye  Contributor address; City; State; Zip Code 600 Commerce Street Dallas TX 75202	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Dallas County
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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.		<b>1</b> Total pages Schedule A1: 5
<b>2</b> FILER NAME John W Price		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayesha Rah  <b>6</b> Contributor address; City; State; Zip Code 8111 LBJ Freeway Suite Dallas TX 75251 6600	<b>7</b> Amount of contribution (\$) \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Sef
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tonya Parker  Contributor address; City; State; Zip Code P. O. Box 22031 Dallas TX 75222	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Dallas County
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandra Jackson  Contributor address; City; State; Zip Code P. O. Box 542601 Gand Prairie TX 75054	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) D
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dianne Jones  Contributor address; City; State; Zip Code 201 Landry Court Irving TX 85063	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Dallas
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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: 5
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 10/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbie Partida-Kipness  6 Contributor address; City; State; Zip Code 4435 Mill Run Rd Dallas TX 75244	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Dallas County <span style="float: right;">JAN 14 '25 @ 10:02</span>
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melanie Tillery  Contributor address; City; State; Zip Code 4513 Scenic Circle Garland TX 75043	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date	Full name of contributor <input type="checkbox"/> 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 <input type="checkbox"/> out-of-state PAC (ID#: _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 07/17/2024	5 Payee name US Postal Service	
6 Amount (\$) \$14.41	7 Payee address; 401 Tom Landry Hwy Dallas TX 75260	City; State; Zip Code
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	(b) Description Mailing of Funeral Resolution
	(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 Office held County Commission
Date 07/23/2024	Payee name US Postal Service	
Amount (\$) \$19.70	Payee address; 401 Tom Landry Hwy Dallas TX 65260	City; State; Zip Code
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	Description Mailing of Funeral Resolutoin
	<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	Office sought Office held
Date 07/01/2024	Payee name Mineava Quazada Tire Shop	
Amount (\$) \$1,500.00	Payee address; 337 E Ledbetter Dallas TX 75232	City; State; Zip Code
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense	Description 2 Campaign SUV Wheels OurMan and RMAN2
	<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 County Commissioner # Office held County Commission

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 07/01/2024	5 Payee name MMS Company Ad Specialties LLC	
6 Amount (\$) \$1,500.00	7 Payee address; 217 N I-35E City; Desoto	State; TX Zip Code 75115
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) AdvertisingExpense	(b) Description Production and Design Work
	(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 County Commissioner # Office held County Commission
Date 07/08/2024	Payee name Hailee Hall	
Amount (\$) \$500.00	Payee address; 6335 ELDER GROVE DR City; Dallas	State; TX Zip Code 75232
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description Social Media
	<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 County Commissioner # Office held County Commission
Date 07/08/2024	Payee name MMS Company Ad Specialties LLC	
Amount (\$) \$1,500.00	Payee address; 217 N I-35E City; Desoto	State; TX Zip Code 75115
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense	Description July 2024 Campaign Ofc Rental
	<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 County Commissioner # Office held County Commission
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 07/10/2024	5 Payee name Evans Engraving	
6 Amount (\$) \$352.00	7 Payee address; 208 S Tyler	City; State; Zip Code Dallas TX 75208
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	(b) Description Framing of Funeral Resolution
	(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 Office held County Commission
Date 07/10/2024	Payee name Classic Oil and Lube	
Amount (\$) \$106.69	Payee address; 152 E Davis Street	City; State; Zip Code Dallas TX 75203
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense	Description Campaign SUV RMAN Oil Change
	<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 County Commissioner # Office held County Commission
Date 07/15/2024	Payee name MMS Company Ad Specialties LLC	
Amount (\$) \$1,600.00	Payee address; 217 N I-35E	City; State; Zip Code Desoto TX 75115
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	Description Back to School Backpacks
	<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 County Commissioner # Office held County Commission

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 07/15/2024	5 Payee name John Ames Tax Assessor Collector	
6 Amount (\$) \$76.25	7 Payee address; 500 Elm Street	City; State; Zip Code Dallas TX 75202
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense	(b) Description License Plate CMISNR
	(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 County Commissioner # Office held County Commission
Date 08/16/2024	Payee name Texas Organization of Black County Commissioners	
Amount (\$) \$100.00	Payee address; 205 Veteran's memorial Drive	City; State; Zip Code Navasoto TX 77868
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Elected County Official Annual Memembership Fees
	<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 County Commissioner # Office held County Commission
Date 08/02/2024	Payee name Hailee Hall	
Amount (\$) \$500.00	Payee address; 6335 ELDER GROVE DR	City; State; Zip Code Dallas TX 75232
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description Social Media
	<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 County Commissioner # Office held County Commission
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 08/02/2024	5 Payee name MMS Company Ad Specialties LLC	
6 Amount (\$) \$841.24	7 Payee address; 217 N I-35E	City; Desoto
	State; TX	Zip Code 75115
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense	(b) Description August 2024 Campaign Ofc Rent and Reimbursement OURMAN Registration
	(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 County Commissioner #
		Office held County Commission
Date 08/09/2024	Payee name Evans Engraving	
Amount (\$) \$540.00	Payee address; 208 S Tyler	City; Dallas
	State; TX	Zip Code 75208
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	Description Framing of Funeral Resolution
	<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	Office sought
		Office held
Date 08/26/2024	Payee name Hailee Hall	
Amount (\$) \$500.00	Payee address; 6335 ELDER GROVE DR	City; Dallas
	State; TX	Zip Code 75232
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description Social Media
	<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 County Commissioner #
		Office held County Commission

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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  
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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 08/27/2024	5 Payee name MMS Company Ad Specialties LLC	
6 Amount (\$) \$2,300.00	7 Payee address; 217 N I-35E	City; State; Zip Code Desoto TX 75115
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) AdvertisingExpense	(b) Description Voter Lapel Pins and September 2024 Rent
	(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 County Commissioner # Office held County Commission
Date 08/29/2024	Payee name Roy Smith Auto	
Amount (\$) \$500.00	Payee address; 3807 S Lancaster Rd	City; State; Zip Code Dallas TX 75215
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense	Description 2 Truck Repair OurMan and RMAN2
	<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 County Commissioner # Office held County Commission
Date 08/29/2024	Payee name Texas Metro News	
Amount (\$) \$4,500.00	Payee address; 320 South R L Thornton Fry Ste 100	City; State; Zip Code Dallas TX 75203
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description Campaign Advertising
	<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 County Commissioner # Office held County Commission

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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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 10/01/2024	5 Payee name Apple Services	
6 Amount (\$) \$1.98	7 Payee address; Goldman Sachs Bank, Lockbox 6112, P.O. Box 7247	City; State; Zip Code Philadelphia PA 19170-6112
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense	(b) Description iPhone storage fees
	(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 County Commissioner # Office held County Commission
Date 09/05/2024	Payee name Evans Engraving	
Amount (\$) \$446.50	Payee address; 208 S Tyler	City; State; Zip Code Dallas TX 75208
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	Description Framing of Funeral Resolution
	<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 County Commissioner # Office held County Commission
Date 09/24/2024	Payee name Underground Customs Body Works	
Amount (\$) \$400.00	Payee address; 6569 Hunnicut Rd	City; State; Zip Code Dallas TX 75224
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense	Description Body Repair on RMAN Campaign SUV
	<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 County Commissioner # Office held County Commission

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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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 10/21/2024	5 Payee name US Postal Service	
6 Amount (\$) \$38.71	7 Payee address; 401 Tom Landry Hwy	City; State; Zip Code Dallas TX 75260
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense	(b) Description Mailing of Funeral Resolutions (2)
	(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	Office sought Office held
Date 10/02/2024	Payee name Laymon Lightfoot Campaign	
Amount (\$) \$500.00	Payee address; 1521 Heritage Blvd	City; State; Zip Code Glenn Heights TX 75154
<b>PURPOSE OF EXPENDITURE</b>	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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Laymon Lightfoot	Office sought Office held City Council Place 5 City Council Place !
Date 10/02/2024	Payee name ALW Entertainment	
Amount (\$) \$750.00	Payee address; 731 South RL Thornton Frwy	City; State; Zip Code Dallas TX 75203
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	Description Constituent Awards for State Fair Classic
	<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	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  
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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 10/02/2024	5 Payee name Hailee Hall	
6 Amount (\$) \$500.00	7 Payee address; 6335 ELDER GROVE DR	City; State; Zip Code Dallas TX 75232
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) AdvertisingExpense	(b) Description Social Media
	(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 County Commissioner # Office held County Commission
Date 10/02/2024	Payee name MMS Company Ad Specialties LLC	
Amount (\$) \$700.00	Payee address; 217 N I-35E	City; State; Zip Code Desoto TX 75115
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense	Description October Rent Campaign Office
	<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 County Commissioner # Office held County Commission
Date 10/04/2024	Payee name Evans Engraving	
Amount (\$) \$399.50	Payee address; 208 S Tyler	City; State; Zip Code Dallas TX 75208
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	Description Framing of Funeral Resolution
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Bariding  
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.

<b>1</b> Total pages Schedule F1: 19	<b>2</b> FILER NAME John W Price	<b>3</b> Filer ID (Ethics Commission Filers)		
<b>4</b> Date 10/07/2024	<b>5</b> Payee name MMS Company Ad Specialties LLC			
<b>6</b> Amount (\$) \$5,600.00	<b>7</b> Payee address; 217 N I-35E	City; Desoto	State; TX	Zip Code 75115
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) PollingExpense		<b>(b)</b> Description Slate Design and Distribution	
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought County Commissioner #	Office held County Commission	
Date 10/16/2024	Payee name Darryl Ayers, Jr			
Amount (\$) \$500.00	Payee address; 206 Cool Meadow	City; Red Oak	State; TX	Zip Code 75154
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) EventExpense		Description Photography	
	<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 County Commissioner #	Office held County Commission	
Date 10/16/2024	Payee name Paula Briggs			
Amount (\$) \$400.00	Payee address; 8301 S Polk	City; Dallas	State; TX	Zip Code 75232
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FoodBeverageExpense		Description Catering for District 3 Town Hall Meeting at South Dallas Govt Center	
	<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 County Commissioner #	Office held County Commission	

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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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 10/18/2024	5 Payee name Finishing and Mailing Center	
6 Amount (\$) \$3,197.00	7 Payee address; 2151 W Commerce	City; State; Zip Code Dallas TX 75212
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) PrintingExpense	(b) Description Mailing Service to Print Campaign Mailer
	(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 County Commissioner # Office held County Commission
Date 10/22/2024	Payee name The Order Desk	
Amount (\$) \$12,141.17	Payee address; 9840 Monroe Dr Ste 104	City; State; Zip Code Dallas TX 75220
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) PrintingExpense	Description November 5 2024 Mailers - 3 Rounds
	<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 County Commissioner # Office held County Commission
Date 10/22/2024	Payee name Arm Ministry	
Amount (\$) \$1,000.00	Payee address; 1128 Reverend CBT Smith	City; State; Zip Code Dallas TX 75203
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description November 5 2024 Mailers - 3 Rounds
	<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 County Commissioner # Office held County Commission

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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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 10/31/2024	5 Payee name MMS Company Ad Specialties LLC	
6 Amount (\$) \$5,000.00	7 Payee address; 217 N I-35E	City; State; Zip Code Desoto TX 75115
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) PollingExpense	(b) Description Canvass Program and Design Work
	(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 County Commissioner # Office held County Commissioi
Date 10/31/2024	Payee name Mesquite BBQ	
Amount (\$) \$2,250.00	Payee address; 145 E Davis Street	City; State; Zip Code Mesquite TX 75149
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) EventExpense	Description Catering for Grand Opening of Mesquite Government Center
	<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 County Commissioner # Office held County Commissioi
Date 10/30/2024	Payee name Hailee Hall	
Amount (\$) \$500.00	Payee address; 6335 ELDER GROVE DR	City; State; Zip Code Dallas TX 75232
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description Social Media
	<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 County Commissioner # Office held County Commissioi

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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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 10/31/2024	5 Payee name MMS Company Ad Specialties LLC	
6 Amount (\$) \$725.00	7 Payee address; 217 N I-35E City; Desoto State; TX Zip Code 75115	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	(b) Description November 2024 Campaign Office Rent <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 County Commissioner # Office held County Commissionior
Date 11/13/2024	Payee name US Postal Service	
Amount (\$) \$36.15	Payee address; 401 Tom Landry Hwy City; Dallas State; TX Zip Code 75260	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	Description Mailing of Funeral Resolutions (2) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/04/2024	Payee name Beyond the Slogan	
Amount (\$) \$7,200.00	Payee address; 2710 Routh Creek #1102 City; Richardson State; TX Zip Code 75062	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) PollingExpense <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	Description Text Program <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 County Commissioner # Office held County Commissionior

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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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 11/12/2024	5 Payee name Evans Engraving	
6 Amount (\$) \$423.00	7 Payee address; 208 S Tyler	City; State; Zip Code Dallas TX 75208
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	(b) Description Framing of Funeral Resolution
	(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 11/15/2024	Payee name US Postal Service	
Amount (\$) \$400.00	Payee address; 401 Tom Landry Hwy	City; State; Zip Code Dallas TX 75260
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Annual Post Office Box Fee
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Office held County Commissioner # County Commission
Date 11/26/2024	Payee name Glen Oaks United Methodist Church	
Amount (\$) \$200.00	Payee address; 4606 S Polk Street	City; State; Zip Code Dallas TX 75232
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description Advertising in 68th Anniversary Program Book
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Price	Office sought Office held County Commissioner # County Commission

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 11/29/2024	5 Payee name Darryl Ayers, Jr.	
6 Amount (\$) \$500.00	7 Payee address; 206 Cool Meadow	City; State; Zip Code Red Oak TX 75154
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) EventExpense	(b) Description Photography for Mesquite Govt Center Grand Opening
	(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 County Commissioner #
Date 10/31/2024	Payee name MMS Company Ad Specialties LLC	
Amount (\$) \$5,492.59	Payee address; 217 N I-35E	City; State; Zip Code Desoto TX 75115
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) PollingExpense	Description Canvassing Program Phase Two
	<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 County Commissioner #
Date 12/31/2024	Payee name Paypal	
Amount (\$) \$248.90	Payee address; 2211 North First Street	City; State; Zip Code San Jose CA 95131
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Paypal Fees
	<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 County Commissioner #
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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  
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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 11/26/2024	5 Payee name Stronger Together	
6 Amount (\$) \$500.00	7 Payee address; 3798 Shady Hill Drive	City; State; Zip Code Dallas TX 75229
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	(b) Description Miss Fort Worth Teen Pageant Lily Roberts
	(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 12/04/2024	Payee name Evans Engraving	
Amount (\$) \$282.00	Payee address; 208 S Tyler	City; State; Zip Code Dallas TX 75208
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	Description Framing of Funeral Resolution
	<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 12/12/2024	Payee name MMS Company Ad Specialties LLC	
Amount (\$) \$1,000.00	Payee address; 217 N I-35E	City; State; Zip Code Desoto TX 75115
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	Description Blanket Drive for Senior Citizen/ Homeless
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### 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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 12/13/0224	5 Payee name Tea Cake Kids	
6 Amount (\$) \$474.14	7 Payee address; 217 Tessman	City; State; Zip Code Hutchins TX 75141
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	(b) Description Newborn Gifts for Constituents
	(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 Office held County Commission
Date 12/12/2024	Payee name MMS Company Ad Specialties LLC	
Amount (\$) \$1,000.00	Payee address; 217 N I-35E	City; State; Zip Code Desoto TX 75115
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) EventExpense	Description Kwanzaa Card
	<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 Office held County Commission
Date 12/20/2024	Payee name MMS Company Ad Specialties LLC	
Amount (\$) \$3,828.53	Payee address; 217 N I-35E	City; State; Zip Code Desoto TX 75115
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	Description Reimbursement for R&B3 Employees Appreciation Gifts
	<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	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  
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: 19	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 12/09/2024	5 Payee name US Postal Service	
6 Amount (\$) \$19.30	7 Payee address; 401 Tom Landry Fwy	City; Dallas State; TX Zip Code 75260
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense	(b) Description Mailing of Resolutions
	(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 12/09/2024	Payee name MMS Company	
Amount (\$) \$725.00	Payee address; 217 N I35E	City; Desoto State; TX Zip Code 75115
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense	Description December 2024 Campaign Office Rent
	<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 Dist #3 Office held Commissioner Dist
Date 12/04/2024	Payee name Hailee Hall	
Amount (\$) \$500.00	Payee address; 6335 Elder Grove Dr	City; Dallas State; TX Zip Code 75232
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description Social Media
	<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 Dist #3 Office held Commissioner Dist
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidates/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.

<b>1</b> Total pages Schedule F1: 19		<b>2</b> FILER NAME John W Price		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 12/23/2024		<b>5</b> Payee name Beaudry Gallery & Framing			
<b>6</b> Amount (\$) \$332.07		<b>7</b> Payee address; 7009 John W Carpenter Fw		City; Dallas	State; TX
				Zip Code 75247	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense		<b>(b)</b> Description Framing of Historial Piece for Memorial		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> 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		
	<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		Payee name			
Amount (\$)		Payee address;		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
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		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4: 2	2 FILER NAME John W Price	3 FILER ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$1,431.44
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5 CREDIT CARD ISSUER	Name of financial institution USAA Saving
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6 PAYMENT	(a) Amount Charged \$ 408.19	(b) Date Expenditure Charged 07/31/2024	(c) Date(s) Credit Card Issuer Paid 07/01/2024; 07/13/2024;07/25/2024
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7 PAYEE	(a) Payee name Fuel City	(b) Payee address; City, State, Zip Code 801 Riverfront Blvd Dallas TX 75204
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8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense	(b) Description Gas for RMAN2
	(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 County Commissioner #3	Office Held County Commissioner #3
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PAYMENT	(a) Amount Charged \$ 370.91	(b) Date Expenditure Charged 09/05/2024	(c) Date(s) Credit Card Issuer Paid 08/3/2024/ 08/13/2024; 08/22/2024
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PAYEE	(a) Payee name Fuel City	(b) Payee address; City, State, Zip Code 801 Riverfront Blvd Dallas TX 75204
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PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense	(b) Description Gas for RMAN2
	(c) <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 County Commissioner #3	Office Held County Commissioner #3
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PAYMENT	(a) Amount Charged \$ 421.36	(b) Date Expenditure Charged 09/30/2024	(c) Date(s) Credit Card Issuer Paid 08/30/2024; 09/06/2024; 09//14/2024
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PAYEE	(a) Payee name Fuel City	(b) Payee address; City, State, Zip Code 801 Riverfront Blvd Dallas TX 75204
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PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense	(b) Description Gas for RMAN2
	(c) <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 County Commissioner #3	Office Held County Commissioner #3
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4: 2 2 FILER NAME John W Price 3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$1,431.44

5 CREDIT CARD ISSUER Name of financial institution USAA Saving

6 PAYMENT (a) Amount Charged \$ \$230.98 (b) Date Expenditure Charged 12/01/2024 (c) Date(s) Credit Card Issuer Paid 12/18/2024

7 PAYEE (a) Payee name Brake Stop (b) Payee address; City, State, Zip Code 4308 Live Oak St Dallas TX 75204

8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Campaign OURMAN SUV maintenance  
☐ Political  
☒ Non-Political  
(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name John Price Office Sought Commissioner Dist #3 Office Held Commissioner Dist #3

PAYMENT (a) Amount Charged \$ (b) Date Expenditure Charged (c) Date(s) Credit Card Issuer Paid

PAYEE (a) Payee name (b) Payee address; City, State, Zip Code

PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description  
☐ Political  
☐ Non-Political  
(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office Sought Office Held

PAYMENT (a) Amount Charged \$ (b) Date Expenditure Charged (c) Date(s) Credit Card Issuer Paid

PAYEE (a) Payee name (b) Payee address; City, State, Zip Code

PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description  
☐ Political  
☐ Non-Political  
(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office Sought Office Held

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