


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	2 Total pages filed: 17				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY RECEIVED Date Received JAN 15 2021  CITY SECRETARY'S CITY OF AMARILLO			
		Ginger					
	NICKNAME	LAST	SUFFIX				
		Nelson					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE				
	301 S. Polk St., Ste. 102, LB 37						
	Amarillo, TX 79101						
Date Held		Date Received					
Receipt #		Amount					
Date Processed							
Date Imaged							
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI				
		Dr.	Alan				
	NICKNAME	LAST	SUFFIX				
		Keister					
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	1215 S. Coulter		Suite 301	Amarillo	TX	79106	
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(806)	355-9741					
8 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)			
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
		07/01/2020				12/31/2020	
10 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
	05/01/2020			<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)			
	Mayor			Mayor			

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Nelson, Ginger	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 61,130.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,334.87
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 44,141.84
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 10,000.00

17 AFFIDAVIT


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



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ginger Nelson, this the 15th day of January, 2021, to certify which, witness my hand and seal of office.



 Signature of officer administering

Printed name of officer administering
 DARLA HENDERSON
 Notary Public, State of Texas
 Notary ID #512654-3
 Commission Expires 11-14-2021

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

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18 FILER NAME Nelson, Ginger	19 Filer ID
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 61,000.00	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 130.00	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 7,334.87	
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/7 Rpt: 4/17
2 FILER NAME Nelson, Ginger		3 Filer ID
4 Date 12/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bentley, Scott & Kim <hr/> 6 Contributor address; City; State; Zip Code 8007 Patriot Amarillo, TX 79119	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickerstaff, Cliff <hr/> Contributor address; City; State; Zip Code 410 S. Taylor Amarillo, TX 79101	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bivins, Tom <hr/> Contributor address; City; State; Zip Code P.O. Box 708 Amarillo, TX 79105	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boykin, Lori <hr/> Contributor address; City; State; Zip Code 2603 S. Travis St. Amarillo, TX 79109	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Eddie & Janie <hr/> Contributor address; City; State; Zip Code 3002 S. Lipscomb Amarillo, TX 79109	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/7 Rpt: 5/17
2 FILER NAME Nelson, Ginger		3 Filer ID
4 Date 12/29/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, John <hr/> 6 Contributor address; City; State; Zip Code 5000 Emil Ave. Amarillo, TX 79106	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouch, Dennis & Cindy <hr/> Contributor address; City; State; Zip Code 7706 Pebblebrook Dr. Amarillo, TX 79119	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coury, Kirk & Madeline <hr/> Contributor address; City; State; Zip Code 1707 Clubview Dr. Amarillo, TX 79124	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Kris <hr/> Contributor address; City; State; Zip Code 7707 London Court Amarillo, TX 79119	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawkins, Pattilou <hr/> Contributor address; City; State; Zip Code 2805 S. Travis Amarillo, TX 79109	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/7 Rpt: 6/17
2 FILER NAME Nelson, Ginger		3 Filer ID
4 Date 12/29/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Smith & Barbara	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code 6210 Montgomery Rd. Midlothian, TX 76065		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, Aaron & Erin	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 30 Cypress Point Amarillo, TX 79124		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilliland, Bill & Sandra	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 2806 Hughes Amarillo, TX 79109		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Charlie & Joan	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code P.O. Box 2944 Amarillo, TX 79105		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Bill & Beverly	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code 7802 Stuyvesant Ave. Amarillo, TX 79121		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/7 Rpt: 7/17
2 FILER NAME Nelson, Ginger		3 Filer ID
4 Date 12/29/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Jason & Shannon <hr/> 6 Contributor address; City; State; Zip Code 7901 Valcour Dr. Amarillo, TX 79119	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Mike & Liz <hr/> Contributor address; City; State; Zip Code P.O. Box 51149 Amarillo, TX 79159	Amount of Contribution (\$) \$4,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kritser, John <hr/> Contributor address; City; State; Zip Code P.O. Box 31388 Amarillo, TX 79120	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landess, Claudette L. <hr/> Contributor address; City; State; Zip Code 9 Teal Court Amarillo, TX 79106	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lovelady, Carol & Sam <hr/> Contributor address; City; State; Zip Code 2817 Crockett Amarillo, TX 79109	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/7 Rpt: 8/17
2 FILER NAME Nelson, Ginger		3 Filer ID
4 Date 12/21/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merrick, Garth & Susie <hr/> 6 Contributor address; City; State; Zip Code 1005 S. Polk St. Amarillo, TX 79101	7 Amount of Contribution (\$) \$4,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Dee <hr/> Contributor address; City; State; Zip Code 5315 Berget Dr. Amarillo, TX 79106	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Oth <hr/> Contributor address; City; State; Zip Code 6712 Sandie Dr. Amarillo, TX 79109	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Julie & Greg <hr/> Contributor address; City; State; Zip Code 1201 S. Taylor Amarillo, TX 79101	Amount of Contribution (\$) \$4,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Dean <hr/> Contributor address; City; State; Zip Code 2609 S. Hughes Amarillo, TX 79109	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/7 Rpt: 9/17
2 FILER NAME Nelson, Ginger		3 Filer ID
4 Date 12/28/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oeschger, Sharon & Larry <hr/> 6 Contributor address; City; State; Zip Code P.O. Box 51166 Amarillo, TX 79159-1166	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price IV, Walter & Karen <hr/> Contributor address; City; State; Zip Code P.O. Box 1749 Amarillo, TX 79105	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Nancy <hr/> Contributor address; City; State; Zip Code 4626 Cape Verde Court Amarillo, TX 79119	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaeffer, Stanley <hr/> Contributor address; City; State; Zip Code 8417 English Bay Pkwy Amarillo, TX 79119	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharp, Randy & Stacy <hr/> Contributor address; City; State; Zip Code 5709 Crabtree Court Amarillo, TX 79119	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/17
2 FILER NAME Nelson, Ginger		3 Filer ID
4 Date 12/18/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparkman, Kyle & Ashley <hr/> 6 Contributor address; City; State; Zip Code 7901 Continental Pkwy Amarillo, TX 79119	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Street, Laura <hr/> Contributor address; City; State; Zip Code 7800 New England Parkway Amarillo, TX 79119	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Sandra <hr/> Contributor address; City; State; Zip Code 5 Willow Bridge Amarillo, TX 79106	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wester, James <hr/> Contributor address; City; State; Zip Code 9320 Lundy Lane Amarillo, TX 79119	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittenburg, Ben <hr/> Contributor address; City; State; Zip Code 2811 S. Parker Amarillo, TX 79109	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 11/17	
2 FILER NAME Nelson, Ginger		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 07/31/2020	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudgins Crosier Sumpter	8 Amount of contribution (\$) \$65.00	9 In-kind contribution description tax services
7 Contributor address; City; State; Zip Code 1800 S. Washington, Suite 215 Amarillo, TX 79102		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudgins Crosier Sumpter	Amount of contribution (\$) \$65.00	In-kind contribution description tax services
Contributor address; City; State; Zip Code 1800 S. Washington, Suite 215 Amarillo, TX 79102		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 1/6 Rpt: 12/17	2 FILER NAME Nelson, Ginger	3 Filer ID
4 Date 07/31/2020	5 Payee name Amarillo National Bank	
6 Amount (\$) \$9.08	7 Payee address; City; State; Zip Code P.O. Box 1 Amarillo, TX 79105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank charges
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 08/31/2020	Payee name Amarillo National Bank	
Amount (\$) \$9.39	Payee address; City; State; Zip Code P.O. Box 1 Amarillo, TX 79105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank charges
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/30/2020	Payee name Amarillo National Bank	
Amount (\$) \$10.02	Payee address; City; State; Zip Code P.O. Box 1 Amarillo, TX 79105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank charges
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 2/6 Rpt: 13/17	2 FILER NAME Nelson, Ginger	3 Filer ID
4 Date 10/31/2020	5 Payee name Amarillo National Bank	
6 Amount (\$) \$9.93	7 Payee address; City; State; Zip Code P.O. Box 1 Amarillo, TX 79105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank charges
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2020	Payee name Amarillo National Bank	
Amount (\$) \$9.65	Payee address; City; State; Zip Code P.O. Box 1 Amarillo, TX 79105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank charges
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/21/2020	Payee name Anedot Inc.	
Amount (\$) \$332.40	Payee address; City; State; Zip Code 1340 Poydras St., Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense transaction fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 3/6 Rpt: 14/17	2 FILER NAME Nelson, Ginger	3 Filer ID
4 Date 12/23/2020	5 Payee name Anedot Inc.	
6 Amount (\$) \$195.60	7 Payee address; City; State; Zip Code 1340 Poydras St., Suite 1770 New Orleans, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense transaction fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 12/23/2020	Payee name Anedot Inc.	
Amount (\$) \$234.60	Payee address; City; State; Zip Code 1340 Poydras St., Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense transaction fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 12/28/2020	Payee name Anedot Inc.	
Amount (\$) \$161.50	Payee address; City; State; Zip Code 1340 Poydras St., Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense transaction fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 4/6 Rpt: 15/17	2 FILER NAME Nelson, Ginger	3 Filer ID
4 Date 12/29/2020	5 Payee name Anedot Inc.	
6 Amount (\$) \$20.30	7 Payee address; City; State; Zip Code 1340 Poydras St., Suite 1770 New Orleans, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense transaction fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name	Office sought	Office held
Date 12/30/2020	Payee name Anedot Inc.	
Amount (\$) \$20.30	Payee address; City; State; Zip Code 1340 Poydras St., Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense transaction fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name	Office sought	Office held
Date 12/31/2020	Payee name Anedot Inc.	
Amount (\$) \$322.10	Payee address; City; State; Zip Code 1340 Poydras St., Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense transaction fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 5/6 Rpt: 16/17	2 FILER NAME Nelson, Ginger	3 Filer ID
4 Date 08/05/2020	5 Payee name No Box Creative	
6 Amount (\$) \$1,200.00	7 Payee address; City; State; Zip Code 1001 SE 3rd, Ste B Amarillo, TX 79102	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2020	Payee name No Box Creative	
Amount (\$) \$1,200.00	Payee address; City; State; Zip Code 1001 SE 3rd, Ste B Amarillo, TX 79102	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2020	Payee name No Box Creative	
Amount (\$) \$1,200.00	Payee address; City; State; Zip Code 1001 SE 3rd, Ste B Amarillo, TX 79102	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 6/6 Rpt: 17/17	2 FILER NAME Nelson, Ginger	3 Filer ID
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4 Date 11/11/2020	5 Payee name No Box Creative
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6 Amount (\$) \$1,200.00	7 Payee address; City; State; Zip Code 1001 SE 3rd, Ste B Amarillo, TX 79102
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2020	Payee name No Box Creative
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Amount (\$) \$1,200.00	Payee address; City; State; Zip Code 1001 SE 3rd, Ste B Amarillo, TX 79102
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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