

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: **18**

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Freda	MI G.	OFFICE USE ONLY	
	NICKNAME	LAST Powell	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	ADDRESS / PO BOX; P O Box 9543	APT / SUITE #;	CITY; Amarillo, Texas	STATE; 79105-9543	ZIP CODE
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (806)	PHONE NUMBER 341-8280	EXTENSION	Date Received RECEIVED APR 23 2021 <i>FA</i> CITY SECRETARY'S CITY OF AMARILLO Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Lynda	MI	Receipt #	Amount \$
	NICKNAME	LAST Smith	SUFFIX	Date Processed	
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 5109 Olsen Circle		CITY; Amarillo	STATE; Texas	ZIP CODE 79106
8 CAMPAIGN TREASURER PHONE	AREA CODE (806)	PHONE NUMBER 372-4720	EXTENSION	Date Imaged	
9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)	
	<input type="checkbox"/> July 15	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month 4	Day 1	Year 21	THROUGH	Month 4 / Day 23 / Year 21
11 ELECTION	ELECTION DATE Month 5 / Day 1 / Year 21		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any) City of Amarillo Council Member, Place 2		13 OFFICE SOUGHT (if known) City of Amarillo Council Member, Place 2		
14 NOTICE FROM POLITICAL COMMITTEE(S) <small>Additional Pages</small>	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

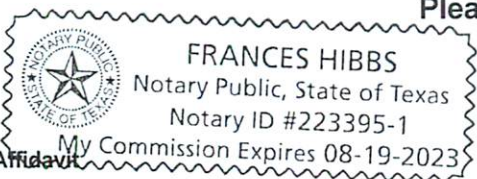
15 C/OH NAME Freda Powell		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9,340.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,884.66
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 29,537.51
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.

Freda Powell

Signature of Candidate or Officeholder

Please complete either option below:



(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Freda Powell this the 23 day of April, 2021, 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

Frances Hibbs Frances Hibbs City Secretary

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 Freda Powell		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 9,340.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 2,884.66
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 03/25/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Mo Hudson 6 Contributor address; City; State; Zip Code 3501 South Soncy, Suite 2, Amarillo, Texas 79119	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Financial Advisor		9 Employer (See Instructions) Edward Jones
Date 03/25/2021	Full name of contributor out-of-state PAC (ID#: _____) Andrew Hall Contributor address; City; State; Zip Code 500 South Taylor, LB 249, Amarillo, Texas 79101	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/30/2021	Full name of contributor out-of-state PAC (ID#: _____) Dee Miller Contributor address; City; State; Zip Code 5315 Berget Street, Amarillo, Texas 79106	Amount of contribution (\$) 300.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 04/01/2021	Full name of contributor out-of-state PAC (ID#: _____) Howard & Lisa Batson Contributor address; City; State; Zip Code 9110 Lundy Lane, Amarillo, Texas 79119	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) First Baptist Church Amarillo
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Freda Powell

3 Filer ID (Ethics Commission Filers)

4 Date

04/05/2021

5 Full name of contributor

William Ware

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

100.00

6 Contributor address;

City;

State;

Zip Code

P O Box 1, Amarillo, Texas 79105-0001

8 Principal occupation / Job title (See Instructions)

President

9 Employer (See Instructions)

Amarillo National Bank

Date

04/05/2021

Full name of contributor

Dennis & Cindy Clouch

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

7706 Pebblebrook Drive, Amarillo, Texas 79119

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/05/2021

Full name of contributor

Patricia Peterson

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

200.00

Contributor address;

City;

State;

Zip Code

No. 5 Edgewater Drive, Amarillo, Texas 79106

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/05/2021

Full name of contributor

Phil & Nancy Woodall

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

25.00

Contributor address;

City;

State;

Zip Code

3921 Woodfield Street, Amarillo, Texas 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/05/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Gail Notestine 6 Contributor address; City; State; Zip Code 2606 Royal Road, Amarillo, Texas 79106	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 04/05/2021	Full name of contributor out-of-state PAC (ID#: _____) Rick & Deb Keffler Contributor address; City; State; Zip Code 7807 Christina Avenue, Amarillo, Texas 79121	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/05/2021	Full name of contributor out-of-state PAC (ID#: _____) Al & Cindy Cunningham Contributor address; City; State; Zip Code P O Box 15167, Amarillo, Texas 79105	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/06/2021	Full name of contributor out-of-state PAC (ID#: _____) Stephen & Martha Walton Contributor address; City; State; Zip Code 2102 Julian Boulevard, Amarillo, Texas 79102	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Freda Powell

3 Filer ID (Ethics Commission Filers)

4 Date

04/06/2021

5 Full name of contributor

Jerry & Sharon Hemphill

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

100.00

6 Contributor address;

City;

State;

Zip Code

1513 Hacienda Drive, Amarillo, Texas 79106

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Date

04/06/2021

Full name of contributor

John Mozola

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

2808 South Bonham Street, Amarillo, Texas 79121

Principal occupation / Job title (See Instructions)

Lawyer

Employer (See Instructions)

Date

04/06/2021

Full name of contributor

Thomas C. Riney

out-of-state PAC (ID#: _____)

Amount of contribution (\$) -

100.00

Contributor address;

City;

State;

Zip Code

320 South Polk Street, Suite 600, Amarillo, Texas 79101

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/06/2021

Full name of contributor

Adair & Dale Buckner

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

16 Hunsley Hills Boulevard, Canyon, Texas 79015

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/06/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Evelyn King 6 Contributor address; City; State; Zip Code 7100 Gainsborough, Amarillo, Texas 79106	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/06/2021	Full name of contributor out-of-state PAC (ID#: _____) Mark Bivins Contributor address; City; State; Zip Code P O Box 708, Amarillo, Texas 79121	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/06/2021	Full name of contributor out-of-state PAC (ID#: _____) Claudette Landess Contributor address; City; State; Zip Code 9 Teal Court, Amarillo, Texas 79106	Amount of contribution (\$) 300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/06/2021	Full name of contributor out-of-state PAC (ID#: _____) Letricia Niegos Contributor address; City; State; Zip Code P O Box 2194, Amarillo, Texas 79105	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/06/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Robert & Susan Wenger	7 Amount of contribution (\$) 200.00
6 Contributor address; City; State; Zip Code 3729 Kileen, Amarillo, Texas 79109		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 04/06/2021	Full name of contributor out-of-state PAC (ID#: _____) Harold & Claudia Stuart	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 7816 Canode, Amarillo, Texas 79121		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/06/2021	Full name of contributor out-of-state PAC (ID#: _____) Oth Miller	Amount of contribution (\$) 300.00
Contributor address; City; State; Zip Code 6712 Sandie Drive, Amarillo, Texas 79109-5047		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/06/2021	Full name of contributor out-of-state PAC (ID#: _____) Ron & Cheri Boyd	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 6 Willow Bridge Drive, Amarillo, Texas 79106-4156		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/07/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Dr. Richard M. High, M. D.	7 Amount of contribution (\$) 25.00
	6 Contributor address; City; State; Zip Code 2500 Teckla Boulevard, Amarillo, Texas 79106	
8 Principal occupation / Job title (See Instructions) Medical Doctor		9 Employer (See Instructions)
Date 04/07/2021	Full name of contributor out-of-state PAC (ID#: _____) Cliff Bickerstaff	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 410 Taylor Street, Amarillo, Texas 79101	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2021	Full name of contributor out-of-state PAC (ID#: _____) Richard Ware	Amount of contribution (\$) 200.00
	Contributor address; City; State; Zip Code P O Box 1, Amarillo, Texas 79105	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Amarillo National Bank
Date 04/07/2021	Full name of contributor out-of-state PAC (ID#: _____) H. R. & Marcia Kelly	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 2301 Judy, Amarillo, Texas 79106	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/07/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Bob & Cheryl Bentley 6 Contributor address; City; State; Zip Code 7403 Park Ridge Drive, Amarillo, Texas 79119	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/07/2021	Full name of contributor out-of-state PAC (ID#: _____) Lewis Britt Contributor address; City; State; Zip Code 4626 Euston Drive, Amarillo, Texas 79109-6556	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2021	Full name of contributor out-of-state PAC (ID#: _____) Joe & Pam Jones Contributor address; City; State; Zip Code 3911 Eaton Drive, Amarillo, Texas 79109-4033	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2021	Full name of contributor out-of-state PAC (ID#: _____) Richard Dambold Contributor address; City; State; Zip Code 5109 Olsen Circle, Amarillo, Texas 79106	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Judge/Lawyer		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/07/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Dr. Pablo R. Diaz-Esquivel	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 1600 Coulter Road, Building E, Suite 703, Amarillo, Texas 79106		
8 Principal occupation / Job title (See Instructions) Medical Doctor		9 Employer (See Instructions)
Date 04/07/2021	Full name of contributor out-of-state PAC (ID#: _____) Johnny Mize	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 7720 Stuyvesant Avenue, Amarillo, Texas 79121-1928		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2021	Full name of contributor out-of-state PAC (ID#: _____) Bill & Jerri Glover	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 5707 Berget Drive, Amarillo, Texas 79106		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2021	Full name of contributor out-of-state PAC (ID#: _____) Robert & Denise Blanchard	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 3928 Doris Drive, Amarillo, Texas 79109		
Principal occupation / Job title (See Instructions) Judge/Lawyer		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/10/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Greg Mitchell 6 Contributor address; City; State; Zip Code 1201 South Taylor, Amarillo, Texas 79101	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 04/10/2021	Full name of contributor out-of-state PAC (ID#: _____) Gloria Roberts Contributor address; City; State; Zip Code 3305 Whitecotton Place, Amarillo, Texas 79121	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 04/10/2021	Full name of contributor out-of-state PAC (ID#: _____) Sandra McCartt Contributor address; City; State; Zip Code 1526 South Kentucky Street, Amarillo, Texas 79102	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 04/10/2021	Full name of contributor out-of-state PAC (ID#: _____) Bill Gilliland Contributor address; City; State; Zip Code 500 South Taylor Street, LB 249, Amarillo, Texas 79101	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/10/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Glen Parkey	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code P O Box 2966, Amarillo, Texas 79105		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 04/10/2021	Full name of contributor out-of-state PAC (ID#: _____) Bob & Alberta Batchelor	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 6718 Jameson Road, Amarillo, Texas 79106-2817		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 04/10/2021	Full name of contributor out-of-state PAC (ID#: _____) Johnny & Judy Turner	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 621 Carnegie Place, Amarillo, Texas 79107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 04/10/2021	Full name of contributor out-of-state PAC (ID#: _____) Jeff Brain	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 2800 Crockett, Amarillo, Texas 79109		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/12/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Eddie T. Drain	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code P O Box 860068, Plano, Texas 75086		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 04/12/2021	Full name of contributor out-of-state PAC (ID#: _____) Steve & Sharon Dalrymple	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 1521 South Rusk Street, Amarillo, Texas 79102-2321		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 04/12/2021	Full name of contributor out-of-state PAC (ID#: _____) Stan & Kathy Morris, Jr.	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 6308 Calumet, Amarillo, Texas 79106		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 04/12/2021	Full name of contributor out-of-state PAC (ID#: _____) Dan & Kathy Dowdy	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 2501 South Van Buren Street, Amarillo, Texas 79109-2520		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/14/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Pattilou Dawkins 6 Contributor address; City; State; Zip Code 2805 South Travis Street, Amarillo, Texas 79109	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 04/15/2021	Full name of contributor out-of-state PAC (ID#: _____) Stanley Schaeffer Contributor address; City; State; Zip Code 8417 English Bay Parkway, Amarillo, Texas 79119	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 04/15/2021	Full name of contributor out-of-state PAC (ID#: _____) Dwight Cowens Contributor address; City; State; Zip Code 1906 North Hughes Street, Amarillo, Texas 79107	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 04/15/2021	Full name of contributor out-of-state PAC (ID#: _____) Jerry Hodge Contributor address; City; State; Zip Code 320 South Polk Street, Suite 100, Amarillo, Texas 79101	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/17/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Patrick & Deana Miller	7 Amount of contribution (\$) 20.00
6 Contributor address; City; State; Zip Code 1410 Southwest 61st Avenue, Amarillo, Texas 79118		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Amarillo Independent School District
Date 04/07/2021	Full name of contributor out-of-state PAC (ID#: _____) Ron & Cheri Boyd	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 6 Willow Bridge Drive, Amarillo, Texas 79106-4156		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2021	Full name of contributor out-of-state PAC (ID#: _____) Charlie & Joan Graham	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code P O Box 2944, Amarillo, Texas 79105-2944		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Freda Powell	3 Filer ID (Ethics Commission Filers)
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4 Date 04/05/2021	5 Payee name ABC Signs
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6 Amount (\$) 1,515.50	7 Payee address; 6212 River Road,	City; Amarillo	State; Texas	Zip Code 79108
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description 24 x 18 Freda Powell Signs with Half Wire Stakes
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Freda Powell	Office sought City of Amarillo Council Member, Place 2	Office held City of Amarillo Council Member, Place 2
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Date 04/06/2021	Payee name Mary Coyne Marketing Communications
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Amount (\$) 1,336.89	Payee address; 3807 Doris Drive	City; Amarillo	State; Texas	Zip Code 79109-5504
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Professional Fees (Graphic Design, Yard Signs, etc.)
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Freda Powell	Office sought City of Amarillo Council Member, Place 2	Office held City of Amarillo Council Member, Place 2
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Date 04/01/2021	Payee name Whit-Co
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Amount (\$) 32.27	Payee address; 1513 South Tyler Street	City; Amarillo	State; Texas	Zip Code 79101
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Deposit Slips
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Freda Powell	Office sought City of Amarillo Council Member, Place 2	Office held City of Amarillo Council Member, Place 2
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED