



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

**15 C/OH NAME**  
Freda Powell

**16 Filer ID (Ethics Commission Filers)**

<b>17 CONTRIBUTION TOTALS</b>	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)	\$ 21,732.37
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 31,961.57
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 18,790.83
<b>OUTSTANDING LOAN TOTALS</b>	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 28<sup>th</sup> day of April

2023, to certify which, witness my hand and seal of office.

Stephanie Coggins Signature of officer administering oath  
Stephanie Coggins Printed name of officer administering oath  
City Secretary 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

<b>19 FILER NAME</b> Freda Powell		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 21,732.37
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 2,006.13
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 31,961.57
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: 16
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 03/27/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Sandra Watts 6 Contributor address; City; State; Zip Code 5 Willow Bridge Drive, Amarillo, Texas 79106	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/27/2023	Full name of contributor out-of-state PAC (ID#: _____) Donise and Ernie Williams Contributor address; City; State; Zip Code 3101 Sequoia Street, Amarillo, Texas 79107	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/27/2023	Full name of contributor out-of-state PAC (ID#: _____) Larry Baxter Contributor address; City; State; Zip Code 1808 North Arthur Street, Amarillo, Texas 79107	Amount of contribution (\$) <b>300.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/27/2023	Full name of contributor out-of-state PAC (ID#: _____) Sharon and Steve Dalrymple Contributor address; City; State; Zip Code 1521 South Rusk Street, Amarillo, Texas 79102-2321	Amount of contribution (\$) <b>1,000.00</b>
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.		

# 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 <b>Freda Powell</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>03/27/2023</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>Pattilou Dawkins</b> 6 Contributor address; City; State; Zip Code <b>2805 South Travis Street, Amarillo, Texas 79109</b>	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>03/27/2023</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Clifford Collen, Jr.</b> Contributor address; City; State; Zip Code <b>1607 South Rusk Street, Amarillo, Texas 79102</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>03/27/2023</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Sandra and Bill Gilliland</b> Contributor address; City; State; Zip Code <b>500 South Taylor, LB 249, Amarillo, Texas 79101</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>03/27/2023</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Janice Hodges</b> Contributor address; City; State; Zip Code <b>3507 Danbury Drive, Amarillo, Texas 79109</b>	Amount of contribution (\$) <b>1,200.00</b>
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.		

# 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: 16
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 03/27/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Gayle and Gary Skinner 6 Contributor address; City; State; Zip Code 5107 Olsen Circle, Amarillo, Texas 79106	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/28/2023	Full name of contributor out-of-state PAC (ID#: _____) Carol and Brian Bruckner Contributor address; City; State; Zip Code 2618 South Hayden, Amarillo, Texas 79109	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/28/2023	Full name of contributor out-of-state PAC (ID#: _____) Laura Street Contributor address; City; State; Zip Code 7800 New England Parkway, Amarillo, Texas 79119	Amount of contribution (\$) <b>1,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/28/2023	Full name of contributor out-of-state PAC (ID#: _____) Terry and Mark White Contributor address; City; State; Zip Code 3517 Kensington Place, Amarillo, Texas 79121	Amount of contribution (\$) <b>100.00</b>
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.		

# 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: <b>16</b>
2 FILER NAME <b>Freda Powell</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>03/28/2023</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>Sara Land</b>	7 Amount of contribution (\$)  <b>500.00</b>
	6 Contributor address; City; State; Zip Code <b>512 Laurel Wood Road, Burleson, Texas 76028-6398</b>	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

Date <b>03/28/2023</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Morris L. Overstreet</b>	Amount of contribution (\$)  <b>500.00</b>
	Contributor address; City; State; Zip Code <b>P O Box 9278, Amarillo, Texas 79105-9278</b>	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date <b>03/30/2023</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Donna and Ross Clopton</b>	Amount of contribution (\$)  <b>200.00</b>
	Contributor address; City; State; Zip Code <b>705 South Tyler, No. 4, Amarillo, Texas 79101</b>	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date <b>03/30/2023</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Patrice and Bill Murray</b>	Amount of contribution (\$)  <b>20.00</b>
	Contributor address; City; State; Zip Code <b>812 Tarrytown Avenue, Amarillo, Texas 79121-1713</b>	

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: <b>16</b>
2 FILER NAME <b>Freda Powell</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>04/04/2023</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>Mark Bivins</b> 6 Contributor address; City; State; Zip Code <b>P O Box 708, Amarillo, Texas 79105</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/04/2023</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Rene and Jeff Brain</b> Contributor address; City; State; Zip Code <b>2800 Crockett Street, Amarillo, Texas 79109</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/04/2023</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Vernon Conner</b> Contributor address; City; State; Zip Code <b>1337 Northwest 12th Avenue, Amarillo, Texas 79107</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/04/2023</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Marjorie Ellis</b> Contributor address; City; State; Zip Code <b>619 South Tyler Street, Suite 40, Amarillo, Texas 79101</b>	Amount of contribution (\$) <b>100.00</b>
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.		



# 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: 16
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/04/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Cari and Mike Good 6 Contributor address; City; State; Zip Code P O Box 50485, Amarillo, Texas 79159	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/04/2023	Full name of contributor out-of-state PAC (ID#: _____) Rhonda Fjetland Contributor address; City; State; Zip Code 1400 Park Circle S, Amarillo, Texas 79108-4923	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/04/2023	Full name of contributor out-of-state PAC (ID#: _____) Rex Vermillion Contributor address; City; State; Zip Code 2811 South Bonham, Amarillo, Texas 79109-3423	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/04/2023	Full name of contributor out-of-state PAC (ID#: _____) Carol and James Hicks Contributor address; City; State; Zip Code P O Box 3717, Amarillo, Texas 79116	Amount of contribution (\$) <b>500.00</b>
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: 16
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/06/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Sharon Brown 6 Contributor address; City; State; Zip Code 1107 14th Street, Canyon, Texas 79015	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/08/2023	Full name of contributor out-of-state PAC (ID#: _____) Meaghan L. Collier Contributor address; City; State; Zip Code 5602 Southwest 43rd Avenue, Amarillo, Texas 79109-5202	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/08/2023	Full name of contributor out-of-state PAC (ID#: _____) Berna Steptoe Contributor address; City; State; Zip Code 815 Monette Drive, Glenn Heights, Texas 75154	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/08/2023	Full name of contributor out-of-state PAC (ID#: _____) Teamsters 577 D.R.I.V.E. Fund Contributor address; City; State; Zip Code P O Box 1609, Amarillo, Texas 79105-1609	Amount of contribution (\$) <b>3,500.00</b>
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.		

# 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: 16
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/12/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Shannon Barnett 6 Contributor address; City; State; Zip Code 2805 South Bowie Street, Amarillo, Texas 79109	7 Amount of contribution (\$) <b>60.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/12/2023	Full name of contributor out-of-state PAC (ID#: _____) Warren Coble Contributor address; City; State; Zip Code 1307 Northwest 13th Avenue, Amarillo, Texas 79107	Amount of contribution (\$) <b>125.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/12/2023	Full name of contributor out-of-state PAC (ID#: _____) Verlene Dickson Contributor address; City; State; Zip Code 8304 Makenna Court, Amarillo, Texas 79119	Amount of contribution (\$) <b>200.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/12/2023	Full name of contributor out-of-state PAC (ID#: _____) Bev and Bill Harris Contributor address; City; State; Zip Code 7802 Stuyvesant Avenue, Amarillo, Texas 79121	Amount of contribution (\$) <b>500.00</b>
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.		

# 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: 16
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/12/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Sue and David Hudson 6 Contributor address; City; State; Zip Code 7413 Park Ridge Drive, Amarillo, Texas 79119	7 Amount of contribution (\$) <b>200.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/12/2023	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 (\$) <b>200.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/12/2023	Full name of contributor out-of-state PAC (ID#: _____) Sandy and Paul Matney Contributor address; City; State; Zip Code 3918 Eaton, Amarillo, Texas 79109	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/12/2023	Full name of contributor out-of-state PAC (ID#: _____) Oth Miller Contributor address; City; State; Zip Code 6712 Sandie Drive, Amarillo, Texas 79109-5047	Amount of contribution (\$) <b>500.00</b>
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.		

# 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: 16
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/12/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Isabel Ramon 6 Contributor address; City; State; Zip Code 7213 Bayswater Road, Amarillo, Texas 79109	7 Amount of contribution (\$)  <b>100.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/13/2023	Full name of contributor out-of-state PAC (ID#: _____) Kim Hooker Contributor address; City; State; Zip Code P O Box 2802, Amarillo, Texas 79105-2802	Amount of contribution (\$)  <b>300.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/13/2023	Full name of contributor out-of-state PAC (ID#: _____) Dee Miller Contributor address; City; State; Zip Code 5315 Berget Drive, Amarillo, Texas 79106	Amount of contribution (\$)  <b>500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Janie and Ed Bradley Contributor address; City; State; Zip Code 3002 South Lipscomb, Amarillo, Texas 79109	Amount of contribution (\$)  <b>1,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>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: 16
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/18/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Carol and Sam Lovelady 6 Contributor address; City; State; Zip Code 2817 Crockett Street, Amarillo, Texas 79109	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Letricia Niegos Contributor address; City; State; Zip Code 25 Country Club, Canyon, Texas 79015	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Judy and Marcus Norris Contributor address; City; State; Zip Code 10 North Primrose Place, Amarillo, Texas 79016-4000	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Richard Ware Contributor address; City; State; Zip Code P O Box 1, Amarillo, Texas 79105	Amount of contribution (\$) <b>1,000.00</b>
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.		

# 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: 16
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/19/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Nathalie Cantly 6 Contributor address; City; State; Zip Code 7530 Monk Street, Amarillo, Texas 79108-5706	7 Amount of contribution (\$)  28.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/19/2023	Full name of contributor out-of-state PAC (ID#: _____) Neal Nossaman Contributor address; City; State; Zip Code 1615 Bryan Street, No. 23, Amarillo, Texas 79102	Amount of contribution (\$)  100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/19/2023	Full name of contributor out-of-state PAC (ID#: _____) Brenda Sadler Contributor address; City; State; Zip Code 3507 Paramount Boulevard, Amarillo, Texas 79109-4628	Amount of contribution (\$)  100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/19/2023	Full name of contributor out-of-state PAC (ID#: _____) Carol and Howard Smith Contributor address; City; State; Zip Code 1616 South Polk Street, Amarillo, Texas 79102	Amount of contribution (\$)  500.00
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.		

# 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: 16
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Christine and Mark Godinez	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code 3219 South Spring Street, Amarillo, Texas 79103		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 04/20/2023	Full name of contributor out-of-state PAC (ID#: _____) Cynthia and Bill Byrd	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code 4001 Van Tassel Street, Amarillo, Texas 79121		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 04/20/2023	Full name of contributor out-of-state PAC (ID#: _____) Tina and Eddy Sauer	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code P O Box 50847, Amarillo, Texas 79159		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 04/04/2023	Full name of contributor out-of-state PAC (ID#: _____) Bernice and David Longmiles	Amount of contribution (\$) <b>20.00</b>
Contributor address; City; State; Zip Code 4004 Cypress Gardens Drive, Fort Worth, Texas 76123		
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: 16
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 03/29/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Nancy Boles 6 Contributor address; City; State; Zip Code 3524 Meadow Drive, Amarillo, Texas 79109-4406	7 Amount of contribution (\$) <b>40.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/27/2023	Full name of contributor out-of-state PAC (ID#: _____) Warren Williams Contributor address; City; State; Zip Code 7701 Pineridge Drive, Amarillo, Texas 79119	Amount of contribution (\$) <b>96.80</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/27/2023	Full name of contributor out-of-state PAC (ID#: _____) Susan and Brad Burks Contributor address; City; State; Zip Code 3506 Farwell Drive, Amarillo, Texas 79109-4038	Amount of contribution (\$) <b>96.80</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/30/2023	Full name of contributor out-of-state PAC (ID#: _____) Savannah Tarbet Contributor address; City; State; Zip Code 5309 South Milam Street, Amarillo, Texas 79110	Amount of contribution (\$) <b>48.25</b>
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.		

# 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: 16
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/08/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Warren Williams 6 Contributor address; City; State; Zip Code 7701 Pineridge Drive, Amarillo, Texas 79119	7 Amount of contribution (\$) <b>96.80</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/09/2023	Full name of contributor out-of-state PAC (ID#: _____) Mary Fay Moore Contributor address; City; State; Zip Code 2808 South Travis Street, Amarillo, Texas 79109	Amount of contribution (\$) <b>96.80</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/12/2023	Full name of contributor out-of-state PAC (ID#: _____) Mildred Rigger Contributor address; City; State; Zip Code 1020 Cimarron Trail, Canyon, Texas 79015	Amount of contribution (\$) <b>96.80</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/16/2023	Full name of contributor out-of-state PAC (ID#: _____) Jerri and Bill Glover Contributor address; City; State; Zip Code 5707 Berget Drive, Amarillo, Texas 79106	Amount of contribution (\$) <b>242.45</b>
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.		

# 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: 16
2 FILER NAME Freda Powell		3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Emily Masters	7 Amount of contribution (\$)  <b>48.25</b>
	6 Contributor address; City; State; Zip Code 1512 South Austin Street, Amarillo, Texas 79102	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

Date 04/21/2023	Full name of contributor out-of-state PAC (ID#: _____) Richard Brown	Amount of contribution (\$)  <b>242.45</b>
	Contributor address; City; State; Zip Code 3004 South Hayden Street, Amarillo, Texas 79109	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date 03/29/2023	Full name of contributor out-of-state PAC (ID#: _____) Carmen and Dean Roper	Amount of contribution (\$)  <b>100.00</b>
	Contributor address; City; State; Zip Code 7725 Baughman Drive, Amarillo, Texas 79121-1753	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date 03/27/2023	Full name of contributor out-of-state PAC (ID#: _____) Brent Beasley	Amount of contribution (\$)  <b>23.97</b>
	Contributor address; City; State; Zip Code 8400 Jill Court, Amarillo, Texas 79119	

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.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <b>2</b>	
2 FILER NAME <b>Freda Powell</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>04/12/2023</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Betty and Roy Bara</b>	8 Amount of Contribution \$ <b>998.13</b>	9 In-kind contribution description <b>Event Fundraiser</b>
7 Contributor address; City; State; Zip Code <b>7415 Southwest 45th Avenue, Amarillo, Texas 79119</b>		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <b>Owner</b>		11 Employer (FOR NON-JUDICIAL) (See Instructions) <b>La Fiesta Grande Restaurants</b>	
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 <b>04/19/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jamie Beckham</b>	Amount of Contribution \$ <b>412.50</b>	In-kind contribution description <b>Event Fundraiser</b>
Contributor address; City; State; Zip Code <b>1520 South Austin Street, Amarillo, Texas 79102</b>		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <b>Self-Employed</b>		Employer (FOR NON-JUDICIAL) (See Instructions) <b>Not Applicable</b>	
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)			
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <b>2</b>	
2 FILER NAME <b>Freda Powell</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date  04/27/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Teresa and Charles Kenedy</b>	8 Amount of Contribution \$  595.50	9 In-kind contribution description  Event Fundraiser
7 Contributor address; City; State; Zip Code 1914 South Highland Street, Amarillo, Texas 79103-4908		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <b>Retired</b>		11 Employer (FOR NON-JUDICIAL)(See Instructions) <b>Not Applicable</b>	
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	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
		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)			
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 2	<b>2</b> FILER NAME Freda Powell	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 03/30/2023	<b>5</b> Payee name FCG Mail, LLC	
<b>6</b> Amount (\$) 1,862.00	<b>7</b> Payee address; City; State; Zip Code 558 East Castle Pines Parkway, Suite B-4, Box 333, Castle Pines, Colorado 80108	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description Push Cards, 4 x 9, and Postage
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Freda Powell	Office sought Mayor
		Office held Council Member, Place 2
Date 04/17/2023	Payee name MCMC	
Amount (\$) 18,077.75	Payee address; City; State; Zip Code 3807 Doris Drive, Amarillo, Texas 79109-5504	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Professional Fees, Printing, and Media
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Freda Powell	Office sought Mayor
		Office held Council Member, Place 2
Date 04/17/2023	Payee name FCG Mail, LLC	
Amount (\$) 11,993.07	Payee address; City; State; Zip Code 558 East Castle Pines Parkway, Suite B-4, Box 333, Castle Pines, Colorado 80108	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Direct Mail Production and Postage
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Freda Powell	Office sought Mayor
		Office held Council Member, Place 2

**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                        | 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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Freda Powell	<b>3</b> Filer ID (Ethics Commission Filers)
-----------------------------------	-------------------------------------	--

<b>4</b> Date 04/17/2023	<b>5</b> Payee name United States Postal Service (USPS) Downtown Amarillo
-----------------------------	--

<b>6</b> Amount (\$) <b>28.75</b>	<b>7</b> Payee address; City; State; Zip Code 505 East 9th Avenue, Amarillo, Texas 79105-9998
--------------------------------------	--

<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description Priority Mail Express
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Freda Powell	Office sought Mayor	Office held Council Member, Place 2
---	---	------------------------	--

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	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	Office sought	Office held
--	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	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	Office sought	Office held
--	-------------------------------	---------------	-------------

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**