

# 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: 21 ✓
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	Mr.	Les	
	NICKNAME	LAST	SUFFIX
		Simpson	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address	ADDRESS / PO BOX,	APT / SUITE #,	CITY, STATE, ZIP CODE
	PO Box 21216		Amarillo Texas 79114
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(806 )	681-9452	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mr.	Ken	
	NICKNAME	LAST	SUFFIX
		Copheranham	
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #,		CITY, STATE, ZIP CODE
	5811 S. Western		Amarillo Texas 79110
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(806 )	236-4968	
9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input checked="" type="checkbox"/> Runoff
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit
			<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)
			<input type="checkbox"/> Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month	Day	Year
	04	27	23
	THROUGH		Month Day Year
			06 14 23
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month Day Year	Primary	<input checked="" type="checkbox"/> Runoff
	06 24 23	General	Other Description
			Special
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)
			Amarillo City Council Place 4
14 NOTICE FROM POLITICAL COMMITTEE(S)  Additional Pages	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	



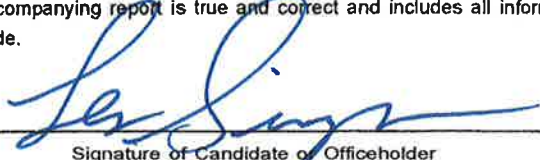
GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

16 C/OH NAME		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)	\$ 43,950.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 48,147.66
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 30,803.66
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 51,100.00

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

  
 Signature of Candidate or Officeholder

Please complete either option below:



Sworn to and subscribed before me by Les Simpson this the 11<sup>th</sup> day of June, 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**

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 43,950.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 51,100.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 48,147.66
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: **11**

2 FILER NAME  
**Les Simpson**

3 Filer ID (Ethics Commission Filers)

4 Date  
**05/04/23**

5 Full name of contributor out-of-state PAC (ID# \_\_\_\_\_)  
**Mr. & Mrs. J. Rex Lemert**

7 Amount of contribution (\$)  
**50.00**

6 Contributor address; City; State; Zip Code  
**2521 Curtis Dr. Amarillo TX 79109**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
**05/04/23**

Full name of contributor out-of-state PAC (ID# \_\_\_\_\_)  
**Stanley Schaeffer**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**8417 English Bay Pkwy Amarillo Texas 79119**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
**05/08/23**

Full name of contributor out-of-state PAC (ID# \_\_\_\_\_)  
**Rick Zimmer**

Amount of contribution (\$)  
**300.00**

Contributor address; City; State; Zip Code  
**2201 Woodbury Amarillo Texas 79124**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
**05/09/23**

Full name of contributor out-of-state PAC (ID# \_\_\_\_\_)  
**Thomas Karr**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**3501 Soncy Rd. Suite 123 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.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1: **11**

2 FILER NAME  
**Les Simpson**

3 Filer ID (Ethics Commission Filers)

4 Date  
**05/10/23**

5 Full name of contributor out-of-state PAC (ID# \_\_\_\_\_)  
**Richard Ware**

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

6 Contributor address; City; State; Zip Code  
**P.O. Box 1 Amarillo TX 79105**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
**05/12/23**

Full name of contributor out-of-state PAC (ID# \_\_\_\_\_)  
**Paul Cagle**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**8 Memorial Lane Houston Texas 77024**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
**05/12/23**

Full name of contributor out-of-state PAC (ID# \_\_\_\_\_)  
**Robert Neely**

Amount of contribution (\$)  
**200.00**

Contributor address; City; State; Zip Code  
**6823 Lost Canyon Dr. Amarillo Texas 79124**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
**05/12/23**

Full name of contributor out-of-state PAC (ID# \_\_\_\_\_)  
**Steve Livingston**

Amount of contribution (\$)  
**200.00**

Contributor address; City; State; Zip Code  
**3405 Carlton Dr. Amarillo Texas 79109**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# SCHEDULE A1

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2 FILER NAME <b>Les Simpson</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>05/12/23</b>	5 Full name of contributor out-of-state PAC (ID# _____) <b>Cindi Bulla</b> ..... 6 Contributor address; City; State; Zip Code <b>1400 Reagan Court Amarillo Texas 79124</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>05/13/23</b>	Full name of contributor out-of-state PAC (ID# _____) <b>Russell &amp; Natrell Long</b> ..... Contributor address; City; State; Zip Code <b>2028 S. Austin # 207 Amarillo Texas 79109</b>	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/13/23</b>	Full name of contributor out-of-state PAC (ID# _____) <b>Howard &amp; Linda Batson</b> ..... Contributor address; City; State; Zip Code <b>9110 Lundy Lane Amarillo Texas 79119</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/14/23</b>	Full name of contributor out-of-state PAC (ID# _____) <b>Barbara Pierson</b> ..... Contributor address; City; State; Zip Code <b>202 Arch Terrace Amarillo Texas 79106</b>	Amount of contribution (\$) <b>30.00</b>
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 <b>Les Simpson</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>05/14/23</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>Mickey McCurdy</b>	7 Amount of contribution (\$) <b>250.00</b>
6 Contributor address; City; State; Zip Code <b>6820 Bent Oak Dr. Amarillo Texas 79124</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <b>05/15/23</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Jim Allen</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>7405 Lynnlee Place Amarillo Texas 79121</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>05/16/23</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Sandra Gilliland</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>2806 S. Hughes St. Amarillo Texas 79109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>05/16/23</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Dee Miller</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>5315 Berget Amarillo Texas 79106</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

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<b>2</b> FILER NAME <b>Les Simpson</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>05/16/23</b>	<b>5</b> Full name of contributor out-of-state PAC (ID# _____) <b>Oth Miller</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>6712 Sandie Dr. Amarillo Texas 79124</b>	<b>7</b> Amount of contribution (\$)  <b>100.00</b>
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> <b>05/17/23</b>	<b>Full name of contributor</b> out-of-state PAC (ID# _____) <b>Thomas C. Riney</b> ..... <b>Contributor address; City; State; Zip Code</b> <b>320 S. Polk Suite 600 Amarillo Texas 79101</b>	<b>Amount of contribution (\$)</b>  <b>100.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> <b>05/17/23</b>	<b>Full name of contributor</b> out-of-state PAC (ID# _____) <b>Claudette L. Landess</b> ..... <b>Contributor address; City; State; Zip Code</b> <b>9 Teal Court Amarillo Texas 79106</b>	<b>Amount of contribution (\$)</b>  <b>100.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> <b>05/18/23</b>	<b>Full name of contributor</b> out-of-state PAC (ID# _____) <b>Roger &amp; Susan Cox</b> ..... <b>Contributor address; City; State; Zip Code</b> <b>7702 New England Pkwy. Amarillo Texas 79119</b>	<b>Amount of contribution (\$)</b>  <b>200.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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<b>2</b> FILER NAME <b>Les Simpson</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>05/18/23</b>	<b>6</b> Full name of contributor out-of-state PAC (ID#: _____) <b>Katherine Smith</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>4131 Julie Dr. Amarillo Texas 79109</b>	<b>7</b> Amount of contribution (\$)  <b>150.00</b>
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> <b>05/18/23</b>	<b>Full name of contributor</b> out-of-state PAC (ID#: _____) <b>Greg &amp; Julie Mitchell</b> ..... <b>Contributor address; City; State; Zip Code</b> <b>3005 S. Ong St. Amarillo Texas 79109</b>	<b>Amount of contribution (\$)</b>  <b>2,000.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> <b>05/18/23</b>	<b>Full name of contributor</b> out-of-state PAC (ID#: _____) <b>David Elizalde</b> ..... <b>Contributor address; City; State; Zip Code</b> <b>13680 Roadrunner Amarillo Texas 79118</b>	<b>Amount of contribution (\$)</b>  <b>1,500.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> <b>05/19/23</b>	<b>Full name of contributor</b> out-of-state PAC (ID#: _____) <b>Trevor Caviness</b> ..... <b>Contributor address; City; State; Zip Code</b> <b>3001 S. Ong St. Amarillo Texas 79109</b>	<b>Amount of contribution (\$)</b>  <b>300.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME <b>Les Simpson</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>05/20/23</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>Michael Clayton</b> <hr/> 6 Contributor address; City; State; Zip Code <b>6666 W. Amarillo Blvd. # 30 Amarillo Texas 79106</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>05/21/23</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Kimberly Dryden</b> <hr/> Contributor address; City; State; Zip Code <b>P.O. Box 506 Amarillo Texas 79105</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/21/23</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Johnny Mize</b> <hr/> Contributor address; City; State; Zip Code <b>7720 Stuyvesant Ave. Amarillo Texas 79121</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/23/23</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Gary Jennings</b> <hr/> Contributor address; City; State; Zip Code <b>4503 Greenwich Pl. Amarillo Texas 79119</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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<b>2</b> FILER NAME <b>Les Simpson</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>05/24/23</b>	<b>5</b> Full name of contributor out-of-state PAC (ID# _____) <b>Samuel &amp; Carol Lovelady</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>2817 Crockett Amarillo Texas 79109</b>	<b>7</b> Amount of contribution (\$) <b>250.00</b>
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>05/25/23</b>	<b>Stanley &amp; Stephanie Holloway</b> ..... <b>6801 White Bluff Trl. Amarillo Texas 79118</b>	<b>500.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>05/26/23</b>	<b>Chris Bruckner</b> ..... <b>2809 S. Hayden Amarillo Texas 79109</b>	<b>250.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>05/26/23</b>	<b>David &amp; Ellen Jones</b> ..... <b>8009 Clearmeadow Amarillo Texas 79119</b>	<b>150.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
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**Reset Form**

**Reset Page**

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<b>2</b> FILER NAME <b>Les Simpson</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>05/27/23</b>	<b>5</b> Full name of contributor out-of-state PAC (ID# _____) <b>James Clement</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>713 40th St. East Tifton Georgia 31794</b>	<b>7</b> Amount of contribution (\$) <b>20.00</b>
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>05/29/23</b>	<b>Amarillo Association of Realtors Political Action Committee</b> ..... <b>5601 Enterprise Cir. Amarillo Texas 79106</b>	<b>4,000.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>06/01/23</b>	<b>Mike &amp; Liz Hughes</b> ..... <b>P.O. Box 51149 Amarillo Texas 79159</b>	<b>1,000.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>06/03/23</b>	<b>Trevor Caviness</b> ..... <b>3001 S. Ong St. Amarillo Texas 79109</b>	<b>1,000.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<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>		

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME <b>Les Simpson</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>06/03/23</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>Terry Caviness</b> <hr/> 6 Contributor address; City; State; Zip Code <b>3004 S. Lipscomb St. Amarillo Texas 79109</b>	7 Amount of contribution (\$)  <b>1,000.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>06/04/23</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Randy &amp; Debbie Jeffers</b> <hr/> Contributor address; City; State; Zip Code <b>1615 Bryan St. # 15A Amarillo Texas 79102</b>	Amount of contribution (\$)  <b>250.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>06/13/23</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>W. Ashley Allen</b> <hr/> Contributor address; City; State; Zip Code <b>2 Bunker Pass Canyon Texas 79015</b>	Amount of contribution (\$)  <b>300.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>06/13/23</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Matt &amp; Sally Forrester</b> <hr/> Contributor address; City; State; Zip Code <b>7803 Christina Ave. Amarillo Texas 79121</b>	Amount of contribution (\$)  <b>250.00</b>
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: 11
2 FILER NAME <b>Les Simpson</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>06/13/23</b>	5 Full name of contributor out-of-state PAC (ID# _____) <b>Cindi Graham</b>	7 Amount of contribution (\$) <b>200.00</b>
6 Contributor address; City; State; Zip Code <b>2803 Parker St. Amarillo Texas 79109</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>06/14/24</b>	Full name of contributor out-of-state PAC (ID# _____) <b>Jerry &amp; Margaret Hodge</b>	Amount of contribution (\$) <b>25,000.00</b>
Contributor address; City; State; Zip Code <b>320 S. Polk, Suite 100 Amarillo Texas 79101</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID# _____) <b>Intentionally Left Blank</b>	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID# _____) <b>Intentionally Left Blank</b>	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.

# LOANS

# SCHEDULE E

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: <b>3</b>
<b>2</b> FILER NAME Les Simpson		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$ 51,100.00</b>
<b>5</b> Date of loan 11/01/22	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____ ) Les Simpson	<b>9</b> Loan Amount (\$) <b>1,000.00</b>
<b>6</b> Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<b>8</b> Lender address; City; State; Zip Code 5304 Brinkman Amarillo Texas 79106	<b>10</b> Interest rate
		<b>11</b> Maturity date
<b>12</b> Principal occupation / Job title (See Instructions) Self		<b>13</b> Employer (See Instructions) Self
<b>14</b> Description of Collateral <input type="checkbox"/> none		<b>15</b> Check if personal funds were deposited into political account (See Instructions)
<b>16</b> GUARANTOR INFORMATION  not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal Occupation (See Instructions)		<b>21</b> Employer (See Instructions)
<b>Date of loan</b> 01/03/23	<b>Name of lender</b> <input type="checkbox"/> out-of-state PAC (ID# _____ ) Les Simpson	<b>Loan Amount (\$)</b> 100.00
<b>Is lender a financial institution?</b> <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<b>Lender address; City; State; Zip Code</b> 5304 Brinkman Amarillo Texas 79106	<b>Interest rate</b>
		<b>Maturity date</b>
<b>Principal occupation / Job title (See Instructions)</b> Self		<b>Employer (See Instructions)</b> Self
<b>Description of Collateral</b> <input type="checkbox"/> none		<b>Check if personal funds were deposited into political account (See Instructions)</b>
<b>GUARANTOR INFORMATION</b>  not applicable	<b>Name of guarantor</b>	<b>Amount Guaranteed (\$)</b>
	<b>Guarantor address; City; State; Zip Code</b>	
<b>Principal Occupation (See Instructions)</b>		<b>Employer (See Instructions)</b>

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# LOANS

# SCHEDULE E

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: <b>3</b>
<b>2</b> FILER NAME Les Simpson		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$ 51,100.00</b>
<b>5</b> Date of loan 02/08/22	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Les Simpson	<b>9</b> Loan Amount (\$) 10,000.00
<b>6</b> Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<b>8</b> Lender address; City; State; Zip Code 5304 Brinkman Amarillo Texas 79106	<b>10</b> Interest rate
		<b>11</b> Maturity date
<b>12</b> Principal occupation / Job title (See Instructions) Self		<b>13</b> Employer (See Instructions) Self
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> none		<b>16</b> Check if personal funds were deposited into political account (See Instructions)
<b>16</b> GUARANTOR INFORMATION  not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal Occupation (See Instructions)		<b>21</b> Employer (See Instructions)
<b>Date of loan</b> 04/17/23	<b>Name of lender</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Les Simpson	<b>Loan Amount (\$)</b> 30,000.00
<b>Is lender a financial institution?</b> <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<b>Lender address; City; State; Zip Code</b> 5304 Brinkman Amarillo Texas 79106	<b>Interest rate</b>
		<b>Maturity date</b>
<b>Principal occupation / Job title (See Instructions)</b> Self		<b>Employer (See Instructions)</b> Self
<b>Description of Collateral</b> <input checked="" type="checkbox"/> none		<b>Check if personal funds were deposited into political account (See Instructions)</b>
<b>GUARANTOR INFORMATION</b>  not applicable	<b>Name of guarantor</b>	<b>Amount Guaranteed (\$)</b>
	<b>Guarantor address; City; State; Zip Code</b>	
<b>Principal Occupation (See Instructions)</b>		<b>Employer (See Instructions)</b>

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# LOANS

# SCHEDULE E

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 E: <b>3</b>
2 FILER NAME <b>Les Simpson</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		<b>\$ 51,100.00</b>
5 Date of loan <b>06/09/23</b>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) <b>Les Simpson</b>	9 Loan Amount (\$) <b>10,000.00</b>
6 Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code <b>5304 Brinkman Amarillo Texas 79106</b>	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions) <b>Self</b>		13 Employer (See Instructions) <b>Self</b>
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION  not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ )	Loan Amount (\$)
Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral none		Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION  not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 4	<b>2</b> FILER NAME Les Simpson	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 05/03/23	<b>5</b> Payee name Sam's Club	
<b>6</b> Amount (\$) 75.87	<b>7</b> Payee address; City; State; Zip Code 8952 Westgate Pkwy W. Amarillo Texas 79124	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description Election Watch Party Supplies
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/05/23	Payee name Walmart	
Amount (\$) 152.94	Payee address; City; State; Zip Code 4610 S. Coulter St. Amarillo Texas 79119	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense	Description Election Watch Party Supplies
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/09/23	Payee name Anedot	
Amount (\$) 10.30	Payee address; City; State; Zip Code 1340 Poydras Street, Suite 1770 New Orleans LA 70112	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Political Contribution Online Fee
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# 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: 4	<b>2</b> FILER NAME Les Simpson	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 05/10/23	<b>5</b> Payee name Nobox Creative
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<b>6</b> Amount (\$) 23,079.97	<b>7</b> Payee address; 4211 I-40, Suite 201	City: Amarillo	State: Texas	Zip Code 79106
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description Marketing/Consulting
	<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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 05/12/23	Payee name Anedot
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Amount (\$) 8.30	Payee address; 1340 Poydras Street, Suite 1770	City: New Orleans	State: LA	Zip Code 70112
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Political Contribution Online Fee
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 05/15/23	Payee name Anedot
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Amount (\$) 20.30	Payee address; 1340 Poydras Street, Suite 1770	City: New Orleans	State: LA	Zip Code 70112
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Political Contribution Online Fee
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>4</b>	<b>2</b> FILER NAME <b>Les Simpson</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>05/16/23</b>	<b>5</b> Payee name <b>Anedot</b>	
<b>6</b> Amount (\$) <b>6.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras Street, Suite 1770 New Orleans LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Fees</b>	<b>(b)</b> Description <b>Political Online Contribution Fee</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name <b>Intentionally Left Blank</b>	
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. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>05/21/23</b>	Payee name <b>Anedot</b>	
Amount (\$) <b>4.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street, Suite 1770 New Orleans LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Fees</b>	Description <b>Political Contribution Online Fee</b>
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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: 4	<b>2</b> FILER NAME Les Simpson	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 05/24/23	<b>5</b> Payee name Anedot
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<b>6</b> Amount (\$) 10.30	<b>7</b> Payee address; 1340 Poydras Street, Suite 1770	City; New Orleans	State; LA	Zip Code 70112
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<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description Political Online Contribution Fee
	<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	Office sought	Office held
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Date 06/06/23	Payee name Home Depot
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Amount (\$) 33.08	Payee address; 2410 S. Georgia	City; Amarillo	State; Texas	Zip Code 79109
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description T-Posts for Outdoor Signage
	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
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Date 06/12/23	Payee name Nobox Creative
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Amount (\$) 24746.00	Payee address; 4211 I-40, Suite 201	City; Amarillo	State; Texas	Zip Code 79106
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Marketing/Consulting
	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
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