

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: 19 ✓								
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Les <hr/> NICKNAME LAST SUFFIX Simpson		OFFICE USE ONLY <div style="border: 2px solid red; border-radius: 50%; padding: 10px; text-align: center; color: red; margin: 10px;"> RECEIVED APR 02 2025 City Secretary </div>								
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	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 <hr/> NICKNAME LAST SUFFIX Copheranham										
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	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	<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff </div> <div> <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit </div> <div> <input type="checkbox"/> Final Report (Attach C/OH - FR) </div> </div>										
10 PERIOD COVERED	Month Day Year Month Day Year 01 / 01 / 25 THROUGH 03 / 24 / 25										
11 ELECTION	<div style="display: flex;"> <div style="flex: 1;"> ELECTION DATE Month Day Year 05 / 03 / 25 </div> <div style="flex: 2;"> ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special </div> </div>										
12 OFFICE	OFFICE HELD (if any) Amarillo City Council Place 4	13 OFFICE SOUGHT (if known) Amarillo City Council Place 4									
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.										
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; padding: 5px;">COMMITTEE TYPE</td> <td style="padding: 5px;">COMMITTEE NAME</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> GENERAL</td> <td style="padding: 5px;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> SPECIFIC</td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE	COMMITTEE NAME										
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS										
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME										
	COMMITTEE CAMPAIGN TREASURER ADDRESS										

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

Les Simpson

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)

\$

28,170.00

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE

\$

4. TOTAL POLITICAL EXPENDITURES

\$

93.50

CONTRIBUTION
BALANCE

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

\$

28,904.85

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

0.00

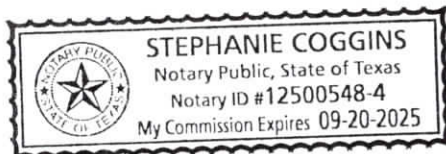
18 SIGNATURE

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:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Les Simpson this the 2nd day of April

20 25, to certify which, witness my hand and seal of office.

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

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____

My address is _____
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME**
Les Simpson**20 Filer ID (Ethics Commission Filers)**

21 SCHEDULE SUBTOTALS	SUBTOTAL
NAME OF SCHEDULE	AMOUNT
1 <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 28,170.00
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	\$ 93.50
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 13
2 FILER NAME Les Simpson		3 Filer ID (Ethics Commission Filers)
4 Date 1/15/25	5 Full name of contributor out-of-state PAC (ID# _____) Donald & Twanna M. Powell 6 Contributor address; City; State; Zip Code PO Box 468 Amarillo Texas 79105	7 Amount of contribution (\$) 1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/21/25	Full name of contributor out-of-state PAC (ID# _____) Stephen Walton Contributor address; City; State; Zip Code 2102 S. Julian Blvd. Amarillo Texas 79102	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/23/25	Full name of contributor out-of-state PAC (ID# _____) Katherine Smith Contributor address; City; State; Zip Code 4131 Julie Dr. Amarillo Texas 79109	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/24/25	Full name of contributor out-of-state PAC (ID# _____) David & Ellen Jones Contributor address; City; State; Zip Code 8009 Clearmeadow Amarillo Texas 79119	Amount of contribution (\$) 250.00
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 13
2 FILER NAME Les Simpson		3 Filer ID (Ethics Commission Filers)
4 Date 2/03/25	5 Full name of contributor out-of-state PAC (ID# _____) John Marmaduke 6 Contributor address; City; State; Zip Code PO Box 33251 Amarillo Texas 79120	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/03/25	Full name of contributor out-of-state PAC (ID# _____) Tony Freeman Contributor address; City; State; Zip Code 3916 Linda Dr. Amarillo Texas 79109	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/04/25	Full name of contributor out-of-state PAC (ID# _____) Sharon Oeschger Contributor address; City; State; Zip Code PO Box 5116 Amarillo Texas 79159	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/05/25	Full name of contributor out-of-state PAC (ID# _____) Brian & Susie Heinrich Contributor address; City; State; Zip Code 3425 Danbury Amarillo Texas 79109	Amount of contribution (\$) 250.00
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 13
2 FILER NAME Les Simpson		3 Filer ID (Ethics Commission Filers)
4 Date 2/05/25	5 Full name of contributor out-of-state PAC (ID# _____) Thomas Karr 6 Contributor address; City; State; Zip Code 7902 Benningron Dr. Amarillo Texas 79119	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/08/25	Full name of contributor out-of-state PAC (ID# _____) Carol Bruckner Contributor address; City; State; Zip Code 2618 S. Hayden Amarillo Texas 79109	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/08/25	Full name of contributor out-of-state PAC (ID# _____) Richard Ware Contributor address; City; State; Zip Code PO Box 1 Amarillo Texas 79101	Amount of contribution (\$) 2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/10/25	Full name of contributor out-of-state PAC (ID# _____) Laura Street Contributor address; City; State; Zip Code 7800 New England Pkwy. Amarillo Texas 79119	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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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1 13
2 FILER NAME Les Simpson		3 Filer ID (Ethics Commission Filers)
4 Date 2/12/25	5 Full name of contributor out-of-state PAC (ID# _____) Timothy Ingalls 6 Contributor address; City; State; Zip Code 1932 Harrison St. Amarillo Texas 79109	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/19/25	Full name of contributor out-of-state PAC (ID# _____) Mike & Liz Hughes Contributor address; City; State; Zip Code PO Box 51149 Amarillo Texas 79159	Amount of contribution (\$) 2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/19/25	Full name of contributor out-of-state PAC (ID# _____) Sylvia Nugent Contributor address; City; State; Zip Code 11508 Royalshire Dr. Dallas Texas 75230	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/23/25	Full name of contributor out-of-state PAC (ID# _____) Samuel & Carol Lovelady Contributor address; City; State; Zip Code 2817 Crockett Amarillo Texas 79109	Amount of contribution (\$) 300.00
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.		

SCHEDULE A1

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filers)

500.00

9 Employer (See Instructions)

250.00

Employer (See Instructions)

500.00

Employer (See Instructions)

1,000.00

Employer (See Instructions)

Revised 1/1/2025

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 13
2 FILER NAME Les Simpson		3 Filer ID (Ethics Commission Filers)
4 Date 3/01/25	5 Full name of contributor out-of-state PAC (ID# _____) Scott Bentley	7 Amount of contribution (\$) 1,000.00
6 Contributor address; City; State; Zip Code 8007 Patriot Amarillo Texas 79119		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/01/25	Full name of contributor out-of-state PAC (ID# _____) Kelly Teal	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 2617 S. Lipscomb St. Amarillo Texas 79109		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/01/25	Full name of contributor out-of-state PAC (ID# _____) Sunny Hodge Campbell	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 4219 Emerson Ave. Dallas Texas 75026		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/03/25	Full name of contributor out-of-state PAC (ID# _____) Jon Mark & Sandy Beilue	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 3419 Fleetwood Dr. 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 13
2 FILER NAME Les Simpson		3 Filer ID (Ethics Commission Filers)
4 Date 3/05/25	5 Full name of contributor out-of-state PAC (ID# _____) Karen Whitlow 6 Contributor address; City; State; Zip Code 5601 Bell St. Amarillo Texas 79109	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/05/25	Full name of contributor out-of-state PAC (ID# _____) Bob Juba Contributor address; City; State; Zip Code 550 S. Avondale Amarillo Texas 79106	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/07/25	Full name of contributor out-of-state PAC (ID# _____) Cindi Bulla Contributor address; City; State; Zip Code 1400 Reagan Court Amarillo Texas 79124	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/07/25	Full name of contributor out-of-state PAC (ID# _____) Claudette L. Landess Contributor address; City; State; Zip Code 9 Teal Court Amarillo Texas 79106	Amount of contribution (\$) 200.00
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* 13
2 FILER NAME Les Simpson		3 Filer ID (Ethics Commission Filers)
4 Date 3/08/25	5 Full name of contributor out-of-state PAC (ID# _____) Vance Reed 6 Contributor address; City; State; Zip Code 4 Pinecrest Dr. Amarillo Texas 79124	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/08/25	Full name of contributor out-of-state PAC (ID# _____) Amarillo Associaton of Realtors PAC Contributor address; City; State; Zip Code 5601 Enterprise Cir. Amarillo Texas 79106	Amount of contribution (\$) 4,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/08/25	Full name of contributor out-of-state PAC (ID# _____) Chris Bruckner Contributor address; City; State; Zip Code 2809 S. Hayden Amarillo Texas 79109	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/09/25	Full name of contributor out-of-state PAC (ID# _____) David & Robin Terry Contributor address; City; State; Zip Code 3 Pebble Beach Ct. Amarillo Texas 79124	Amount of contribution (\$) 250.00
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 13
2 FILER NAME Les Simpson		3 Filer ID (Ethics Commission Filers)
4 Date 3/10/25	5 Full name of contributor out-of-state PAC (ID# _____) Mark Ellis 6 Contributor address; City; State; Zip Code 8212 Victory Dr. Amarillo Texas 79119	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/10/25	Full name of contributor out-of-state PAC (ID# _____) Brian Moore Contributor address; City; State; Zip Code 3333 S. Coulter, C-2 Amarillo Texas 79106	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/11/25	Full name of contributor out-of-state PAC (ID# _____) Gary Molberg Contributor address; City; State; Zip Code 6302 Hyde Parkway Amarillo Texas 79109	Amount of contribution (\$) 70.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/11/25	Full name of contributor out-of-state PAC (ID# _____) Andrew Evans Contributor address; City; State; Zip Code 701 S. Taylor St. Amarillo Texas 79101	Amount of contribution (\$) 250.00
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 13
2 FILER NAME Les Simpson		3 Filer ID (Ethics Commission Filers)
4 Date 3/12/25	5 Full name of contributor out-of-state PAC (ID# _____) Perry & Cindi Graham 6 Contributor address; City; State; Zip Code PO Box 9314 Amarillo Texas 79105	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/13/25	Full name of contributor out-of-state PAC (ID# _____) Mark Haworth Contributor address; City; State; Zip Code 301 S. Polk Amarillo Texas 79105	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/14/25	Full name of contributor out-of-state PAC (ID# _____) Mr. & Mrs. Eddie Bradley Contributor address; City; State; Zip Code 3302 S. Lipscomb Amarillo Texas 79109	Amount of contribution (\$) 3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/16/25	Full name of contributor out-of-state PAC (ID# _____) Jan & Davie Hemphill Contributor address; City; State; Zip Code 6800 Kingsbury Amarillo Texas 79109	Amount of contribution (\$) 250.00
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 13
2 FILER NAME Les Simpson		3 Filer ID (Ethics Commission Filers)
4 Date 3/17/25	5 Full name of contributor out-of-state PAC (ID# _____) Gary & Sally Jennings 6 Contributor address; City; State; Zip Code 4503 Greenwich Pl. Amarillo Texas 79119	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/15/25	Full name of contributor out-of-state PAC (ID# _____) Bonnie Dugie Contributor address; City; State; Zip Code 19269 Mendocino Dr. Canyon Texas 79015	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/17/25	Full name of contributor out-of-state PAC (ID# _____) Shelley Chaloupka Contributor address; City; State; Zip Code 6 Teal Ct. Amarillo Texas 79106	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/20/25	Full name of contributor out-of-state PAC (ID# _____) Eric Zimmerman Contributor address; City; State; Zip Code 1815 SW 28th Ave. Amarillo Texas 79109	Amount of contribution (\$) 100.00
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 **13****2** FILER NAME
Les Simpson**3** Filer ID (Ethics Commission Filers)**4** Date
3/20/25**5** Full name of contributor out-of-state PAC (ID# _____)
Thomas C. Riney**7** Amount of contribution (\$)
200.00**6** Contributor address; City; State; Zip Code
6900 Calumet Amarillo Texas 79106**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date
3/20/25Full name of contributor out-of-state PAC (ID# _____)
Jim AllenAmount of contribution (\$)
500.00Contributor address; City; State; Zip Code
3511 Plum Lane Amarillo Texas 79121

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
3/20/25Full name of contributor out-of-state PAC (ID# _____)
Douglas Woodburn CampaignAmount of contribution (\$)
200.00Contributor address; City; State; Zip Code
500 S. Taylor, LB 264 Amarillo Texas 79101

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
3/20/25Full name of contributor out-of-state PAC (ID# _____)
Greg & Juie MitchellAmount of contribution (\$)
1,000.00Contributor address; City; State; Zip Code
3005 S. Ong St. 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.

SCHEDULE A1

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filers)

250.00

9 Employer (See Instructions)

250.00

Employer (See Instructions)

350.00

Employer (See Instructions)

Employer (See Instructions)

Revised 1/1/2025

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1 3		2 FILER NAME Les Simpson		3 Filer ID (Ethics Commission Filers)	
4 Date 2/12/25		5 Payee name Anedot			
6 Amount (\$) 4.30		7 Payee address; 1340 Poydras Sreet, Suite 1770		City; New Orleans	State; LA Zip Code 70112
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Political Contribution Online Fee		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/23/25		Payee name Anedot			
Amount (\$) 12.30		Payee address; 1340 Poydras Sreet, Suite 1770		City; New Orleans	State; LA Zip Code 70112
PURPOSE OF EXPENDITURE	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
Date 3/05/25		Payee name Anedot			
Amount (\$) 20.30		Payee address; 1340 Poydras Sreet, Suite 1770		City; New Orleans	State; LA Zip Code 70112
PURPOSE OF EXPENDITURE	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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1 3		2 FILER NAME Les Simpson		3 Filer ID (Ethics Commission Filers)	
4 Date 3/07/25		5 Payee name Anedot			
6 Amount (\$) 8.30		7 Payee address; 1340 Poydras Sreet, Suite 1770		City; New Orleans	State; LA Zip Code 70112
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Political Contribution Online Fee		
	(c) Check if travel outside of Texas. Complete Schedule T		Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 3/10/25		Payee name Anedot			
Amount (\$) 2.30		Payee address; 1340 Poydras Sreet, Suite 1770		City; New Orleans	State; LA Zip Code 70112
PURPOSE OF EXPENDITURE	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
Date 3/11/25		Payee name Anedot			
Amount (\$) 3.10		Payee address; 1340 Poydras Sreet, Suite 1770		City; New Orleans	State; LA Zip Code 70112
PURPOSE OF EXPENDITURE	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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3	2 FILER NAME Les Simpson	3 Filer ID (Ethics Commission Filers)	
4 Date 3/20/25	5 Payee name Anedot		
6 Amount (\$) 8.30	7 Payee address; 1340 Poydras Sreet, Suite 1770	City; New Orleans	State; LA Zip Code 70112
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Political Contribution Online Fee
	(c) Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 3/20/25	Payee name Anedot		
Amount (\$) 20.30	Payee address; 1340 Poydras Sreet, Suite 1770	City; New Orleans	State; LA Zip Code 70112
PURPOSE OF EXPENDITURE	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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 3/24/25	Payee name Anedot		
Amount (\$) 14.30	Payee address; 1340 Poydras Sreet, Suite 1770	City; New Orleans	State; LA Zip Code 70112
PURPOSE OF EXPENDITURE	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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

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