

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**OFFICIAL RECORD  
CITY SECRETARY  
FT. WORTH, TX**

**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: **51**

**OFFICE USE ONLY**

Date Received

Date Hand-delivered or Date Marked

Receipt #

Amount \$

Date Processed

Date Imaged



3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR **Mrs** FIRST **Ann** MI

NICKNAME LAST **Zadeh** SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
**P.O. Box 12173**  
**Fort Worth, TX 76110**

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION  
**( 817 ) 924-3811**

6 CAMPAIGN TREASURER NAME

MS / MRS / MR **Mr** FIRST **Glenn** MI

NICKNAME LAST **Bearden** SUFFIX

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
**6601 Eton Ct.**  
**Fort Worth, TX. 76132**

(Residence or Business)

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION  
**( 817 ) 845-4412**

9 REPORT TYPE

January 15     30th day before election     Runoff     15th day after campaign treasurer appointment (Officeholder Only)  
 July 15     8th day before election     Exceeded Modified Reporting Limit     Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year    Month Day Year  
**04 / 21 / 2020**    THROUGH    **06 / 30 / 2021**

11 ELECTION

ELECTION DATE    ELECTION TYPE  
Month Day Year     Primary     Runoff     Other Description  
 General     Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

14 NOTICE FROM POLITICAL COMMITTEE(S)

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

Additional Pages

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME Ann Zadeh		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)	\$ 30.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 26,595.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 81,200.90
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 242.71
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 20,000.00

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.

*Ann Zadeh*  
Signature of Candidate or Officeholder



Please complete either option below:

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Ann Zadeh this the 15<sup>th</sup> day of July

2021, to certify which, witness my hand and seal of office.

Melissa K Brunner Melissa K. Brunner notary  
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 <b>Ann Zadeh</b>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 26,565.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 20,000.00
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 81,200.90
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 5,600.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 110.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <span style="float: right; color: blue;">36</span>
2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>04/22/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Monika Worsley</b>	7 Amount of contribution (\$)  <b>100.00</b>
	6 Contributor address; City; State; Zip Code <b>2905 Riverhallow CT Fort Worth, TX. 76116</b>	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/20/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Bernd Scheffler</b>	Amount of contribution (\$)  <b>50.00</b>
	Contributor address; City; State; Zip Code <b>1608 Lake Shore Fort Worth, TX. 76103</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/22/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Louisa Masters</b>	Amount of contribution (\$)  <b>100.00</b>
	Contributor address; City; State; Zip Code <b>6148 Springleaf Cir Fort Worth, TX. 76133</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/22/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>John Corbin</b>	Amount of contribution (\$)  <b>5.00</b>
	Contributor address; City; State; Zip Code <b>4820 Roanoke St Fort Worth, TX. 76116</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.		



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4 Date <b>04/22/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Michele Hanson</b>	7 Amount of contribution (\$)  <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>5317 Santa Maria Ave Fort Worth, TX. 76114</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/22/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Darlene Marks</b>	Amount of contribution (\$)  <b>50.00</b>
Contributor address; City; State; Zip Code <b>712 May Street Fort Worth, TX. 76104</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/22/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sharon Richey</b>	Amount of contribution (\$)  <b>50.00</b>
Contributor address; City; State; Zip Code <b>4900 Vega CT Fort Worth, TX. 76133</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/22/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>John Robinson</b>	Amount of contribution (\$)  <b>50.00</b>
Contributor address; City; State; Zip Code <b>4349 Rota Cir Fort Worth, TX. 76133</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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4 Date <b>04/22/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Davis Purcell</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>1619 Pennsylvania Ave Fort Worth, TX. 76104</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/22/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Donna Piercy</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>3602 Biscay Dr Arlington, TX. 76016</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/22/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Philip Kingston</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>5901 Palo Pinto Dallas, TX. 75206</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/22/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Susan Wilcox</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>2600 W 7th Street Fort Worth, TX. 76107</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# SCHEDULE A1

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2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>04/22/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Richard Abrams</b>	7 Amount of contribution (\$) <b>1,000.00</b>
6 Contributor address; City; State; Zip Code <b>6145 Wedgwood Dr Fort Worth, TX. 76133</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/22/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Matthew Pitt</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>2121 Edwin St. Fort Worth, TX. 76110</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/22/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Charles Boswell</b>	Amount of contribution (\$) <b>400.00</b>
Contributor address; City; State; Zip Code <b>5213 Byers Avenue Fort Worth, TX. 76107</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/22/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Gordan Kelly</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>4724 Winthrop Ave W Fort Worth, TX. 76116</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>04/22/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Larisa Keltner</b>	7 Amount of contribution (\$) <b>250.00</b>
6 Contributor address; City; State; Zip Code <b>5924 Cypress Point Dr Fort Worth, TX. 76132</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/22/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jason Amon</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>1404 S. Adams St. Fort Worth, TX. 76104</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/22/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Michele Wheeler</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>3409 Swanson Drive Plano, TX. 75025</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/22/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Patricia Vories</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>2400 Mistletoe Blvd Fort Worth, TX. 76110</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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4 Date <b>04/23/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Paige Russey</b> <hr/> 6 Contributor address; City; State; Zip Code <b>3124 Tex Boulevard Fort Worth, TX. 76116</b>	7 Amount of contribution (\$)  <b>250.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/23/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Meralen Tyson</b> <hr/> Contributor address; City; State; Zip Code <b>1351 Mistletoe Dr. Fort Worth, TX. 76110</b>	Amount of contribution (\$)  <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/23/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kevin Khorrami</b> <hr/> Contributor address; City; State; Zip Code <b>7860 Skylake Drive Fort Worth, TX. 76179</b>	Amount of contribution (\$)  <b>250.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/23/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Claudia Camp</b> <hr/> Contributor address; City; State; Zip Code <b>2212 Mistletoe Blvd Fort Worth, TX. 76110</b>	Amount of contribution (\$)  <b>200.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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4 Date <b>04/23/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>John Corbin</b>	7 Amount of contribution (\$) <b>5.00</b>
6 Contributor address; City; State; Zip Code <b>4820 Roanoke St. Fort Worth, TX. 76116</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/23/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kathy Spicer</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>6038 Lovell Ave Fort Worth, TX. 76116</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/23/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ashlee Johnson</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>5340 Quail Run St. Fort Worth, TX. 76107</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/23/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Blaine Manuel</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>1085 Roaring Springs Rd Fort Worth, TX. 76114</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>04/23/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ben Border</b>	7 Amount of contribution (\$) <b>250.00</b>
6 Contributor address; City; State; Zip Code <b>3713 Somerset Ln. Fort Worth, TX. 76109</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/23/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Leo Wesson</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>2107 Stanley Ave Fort Worth, TX. 76110</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/23/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kelly Smith</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>5524 Pershing Ave. Fort Worth, TX. 76107</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/23/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Nicole Corley</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>617 Catalpa Rd Fort Worth, TX. 76131</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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4 Date <b>04/23/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lester Meriwether</b>	7 Amount of contribution (\$) <b>65.00</b>
6 Contributor address; City; State; Zip Code <b>8145 Wendy Benbrook, TX. 76116</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/24/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Dick Ruddell</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>4640 Edenwood Dr Fort Worth, TX. 76123</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/24/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Joel Fryar</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>7205 Lola Drive Fort Worth, TX. 76180</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/24/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Bryan Bogle</b>	Amount of contribution (\$) <b>117.00</b>
Contributor address; City; State; Zip Code <b>3815 South Hills Cir Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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4 Date <b>04/24/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Reed Bilz</b>	7 Amount of contribution (\$) <b>25.00</b>
6 Contributor address; City; State; Zip Code <b>6130 Haley Lane Fort Worth, TX. 76132</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/25/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>William Payne</b>	Amount of contribution (\$) <b>6.00</b>
Contributor address; City; State; Zip Code <b>2701 Benbrook Blvd Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/25/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Cary Clark</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>3217 West Biddison St Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/25/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Martha Williams</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>8105 Mount Shasta Cir Fort Worth, TX. 76137</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: <span style="font-size: 1.2em;">36</span>
2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>04/25/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Carol Cordell</b>	7 Amount of contribution (\$) <b>5.00</b>
6 Contributor address; City; State; Zip Code <b>1217 Marlborough Dr. Fort Worth, TX. 76134</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/25/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>John Miller</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>815 Morrow Street Austin, TX. 78757</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/25/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Daniel Banks</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>1906 Tremont Ave Fort Worth, TX. 76107</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/25/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Janet Brown</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>3408 Cockrell Ave Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>04/23/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Joseph Mollick</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>1280 Sharon Park Dr. #37 Menlo Park, CA. 94025</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/25/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Dennis and Margaret Johnson</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>2116 Park Place Ave Fort Worth, TX. 76110</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/25/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Michael Lummus</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>8009 Raintree CT Alvarado, TX. 76009</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/25/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Karen Myers</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>6401 Ridglea Crest Drive Fort Worth, TX. 76126</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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4 Date <b>04/25/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Graham Stadler</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>2610 Greene Ave Fort Worth, TX. 76109</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Terry Thompson</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>725 Woodland Ave Fort Worth, TX. 76110</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Caroline Dulle</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>1217 Clover Lane Fort Worth, TX. 76107</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Maria Wollmann</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>500 Throckmorton #1307 Fort Worth, TX. 76102</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>04/26/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lon Burnam</b>	7 Amount of contribution (\$) <b>300.00</b>
6 Contributor address; City; State; Zip Code <b>2103 6th Avenue Fort Worth, TX. 76110</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sergio Deleon</b>	Amount of contribution (\$) <b>150.00</b>
Contributor address; City; State; Zip Code <b>4521 Diaz Ave Fort Worth, TX. 76107</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Teresa Turner</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>258 Jefferson Pkwy Fort Worth, TX. 76107</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>David Nudleman</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>4709 Boulder Run Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>04/26/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Stephen McReynolds</b>	7 Amount of contribution (\$) <b>25.00</b>
6 Contributor address; City; State; Zip Code <b>2312 Irwin Fort Worth, TX. 76110</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ruth Karbach</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>3058 Ryan Place Dr Fort Worth, TX. 76110</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>MK Rule</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>408 College Avenue Fort Worth, TX. 76104</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Geraldine Hall</b>	Amount of contribution (\$) <b>75.00</b>
Contributor address; City; State; Zip Code <b>132 Tamarron Drive Fort Worth, TX. 76135</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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4 Date <b>04/26/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Linda Cliburn</b>	7 Amount of contribution (\$) <b>50.00</b>
6 Contributor address; City; State; Zip Code <b>7300 Yolanda Dr. Fort Worth, TX. 76112</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jeff Davis</b>	Amount of contribution (\$) <b>2,000.00</b>
Contributor address; City; State; Zip Code <b>2325 Mistletoe Drive Fort Worth, TX. 76110</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Emily Jones</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>15024 Gladstone Drive Aledo, TX. 76008</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Shirlee Gandy</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>4250 Sarita CT Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>04/26/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Paul Millender</b>	7 Amount of contribution (\$) <b>50.00</b>
6 Contributor address; City; State; Zip Code <b>3121 Lipscomb St Fort Worth, TX. 76110</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jenna Henderson</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>10301 Moranda Road Fort Worth, TX. 76126</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Daniel Haase</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>1670 Watson Rd West Fort Worth, TX. 76103</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kathleen Culebro</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>3850 Washburn Ave Fort Worth, TX. 76107</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>04/26/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Peter Aberg</b> <hr/> 6 Contributor address; City; State; Zip Code <b>2929 Carlisle St Dallas, TX. 75209</b>	7 Amount of contribution (\$)  <b>250.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Josh Lindsay</b> <hr/> Contributor address; City; State; Zip Code <b>2238 Mistletoe Blvd Fort Worth, TX. 76110</b>	Amount of contribution (\$)  <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Joan Kline</b> <hr/> Contributor address; City; State; Zip Code <b>1215 Elizabeth Blvd Fort Worth, TX. 76110</b>	Amount of contribution (\$)  <b>50.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Esther Sevier</b> <hr/> Contributor address; City; State; Zip Code <b>5113 Meridian LN Fort Worth, TX. 76244</b>	Amount of contribution (\$)  <b>50.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>04/26/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>James DuBose</b>	7 Amount of contribution (\$) <b>1,000.00</b>
6 Contributor address; City; State; Zip Code <b>2330 Medford Court East Fort Worth, TX. 76109</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lezlie Culver</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>2717 Manorwood Trl Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/26/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Gayle Hill</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>108 Crestwood Dr Fort Worth, TX. 76107</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/27/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Victoria Adams</b>	Amount of contribution (\$) <b>1,000.00</b>
Contributor address; City; State; Zip Code <b>2330 Medford Court East Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>04/27/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Don Wheeler</b>	7 Amount of contribution (\$) <b>50.00</b>
6 Contributor address; City; State; Zip Code <b>4612 S. Ridge Ter Fort Worth, TX. 76147</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/27/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Edwina Taylor</b>	Amount of contribution (\$) <b>10.00</b>
Contributor address; City; State; Zip Code <b>5112 Norma Fort Worth, TX. 76112</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/27/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sharon Doan</b>	Amount of contribution (\$) <b>150.00</b>
Contributor address; City; State; Zip Code <b>6732 Brants Ln Fort Worth, TX. 76116</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/27/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>John Fischer</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>2837 Townsend Dr Fort Worth, TX. 76110</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>04/27/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Megan Lasch</b>	7 Amount of contribution (\$) <b>250.00</b>
6 Contributor address; City; State; Zip Code <b>5714 Sam Houston Austin, TX. 78731</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/27/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Karl Komatsu</b>	Amount of contribution (\$) <b>2,500.00</b>
Contributor address; City; State; Zip Code <b>3905 Lenox Dr Fort Worth, TX. 76107</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/27/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Atallah Zitoon</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>4632 Moss Rose Dr Fort Worth, TX. 76137</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/27/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>James Husband</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>6940 Stockton Dr Fort Worth, TX. 76132</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>04/27/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Alisa Maples</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>6444 Rosemont Ave Fort Worth, TX. 76116</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/27/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Christy Hill</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>3840 Diamond Loch North Richland Hills, TX. 76180</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/27/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>LeAnne Bearden</b>	Amount of contribution (\$) <b>1,000.00</b>
Contributor address; City; State; Zip Code <b>6601 Eton CT Fort Worth, TX. 76132</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/28/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jeff Kobs</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>5037 Bryce Ave Fort Worth, TX. 76107</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>04/28/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>K Ullmand</b>	7 Amount of contribution (\$) <b>250.00</b>
6 Contributor address; City; State; Zip Code <b>6513 Saucon Valley Dr Fort Worth, TX. 76132</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/28/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Rena Brown</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>3620 Dryden Rd Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/28/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Robert Fernandez</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>2305 Colonial Pkwy Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/28/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Brian Dixon</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>1104 E Leuda St Fort Worth, TX. 76104</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>04/28/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Clay Jenkins</b>	7 Amount of contribution (\$) <b>75.00</b>
6 Contributor address; City; State; Zip Code <b>411 Elm Dallas, TX. 75202</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/29/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Elizabeth Hodge</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>7310 Nine Mile Bridge Rd Fort Worth, TX. 76135</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/29/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Samuel Smart</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>1121 Clara St. Fort Worth, TX. 76110</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/30/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lorie Grandclair-Diaz</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>3114 Aster Ave Fort Worth, TX. 76111</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>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>04/30/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Anita Quinones</b>	7 Amount of contribution (\$) <b>50.00</b>
6 Contributor address; City; State; Zip Code <b>4232 Selkirk Dr. W Fort Worth, TX. 76109</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/30/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Graham Brizendine</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>1825 Thistle Hill #17103 Fort Worth, TX. 76110</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/30/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jacquelyn McCrary</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>4817 Overton Hollow St. Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/01/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Nancy Griffing</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>2827 Bright Trail Sugar Land, TX. 77479</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>05/01/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Karen Myers</b>	7 Amount of contribution (\$) <b>25.00</b>
6 Contributor address; City; State; Zip Code <b>6401 Ridglea Crest Drive Fort Worth, TX. 76126</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>05/10/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sharon Orpen</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>8555 Mulligan Pass Fort Worth, TX. 76179</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/06/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Laurie Stelljes</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>2745 Manorwood Trail Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/06/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Larry Anfin</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>7020 Castle Creek Court Fort Worth, TX. 76132</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>05/06/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Andrea Duffie</b>	7 Amount of contribution (\$) <b>10.00</b>
6 Contributor address; City; State; Zip Code <b>4724 Calmont Ave. Fort Worth, TX. 76107</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>05/06/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Geraldine Hall</b>	Amount of contribution (\$) <b>75.00</b>
Contributor address; City; State; Zip Code <b>132 Tamarron Drive Fort Worth, TX. 76135</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/06/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Gus Guthrie</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>3755 Stoney Creek Ct. Fort Worth, TX. 76116</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/06/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Maynard Dyson</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>2329 Mistletoe Ave Fort Worth, TX. 76110</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>05/06/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Heather Buen</b>	7 Amount of contribution (\$) <b>25.00</b>
6 Contributor address; City; State; Zip Code <b>9078 River Falls Drive Fort Worth, TX. 76118</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>05/06/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Elaine Petrus</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>3736 Country Club Circle Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/06/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Reed Bilz</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>6130 Haley Lane Fort Worth, TX. 76132</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/06/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Danny Jensen</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>4004 Hartwood Dr Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>05/06/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Dan Barrett</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>3930 W 7th Street Fort Worth, TX. 76107</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>05/06/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Beverly Davis</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>6500 Shoal Creek Rd Fort Worth, TX. 76132</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/06/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Heather Breiter</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>6509 Turnberry Dr Fort Worth, TX. 76132</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/06/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Johnny Lewis</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>953 East Terrell Avenue Fort Worth, TX. 76104</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>05/06/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Doug Black</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>2031 Ward Pkwy Fort Worth, TX. 76110</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>05/06/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Elizabeth Wills</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>5440 Sierra Ridge Dr Fort Worth, TX. 76123</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/07/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Robert Fernandez</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>2305 Colonial Pkwy Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/09/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Carol Cordell</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>1217 Marlborough Dr. Fort Worth, TX. 76134</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>06/09/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Rick Herring</b>	7 Amount of contribution (\$) <b>50.00</b>
6 Contributor address; City; State; Zip Code <b>1801 Bolton Street Fort Worth, TX. 76111</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>left blank</b>	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>06/19/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Charles Dreyfus</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>2416 Park Place Ave Fort Worth, TX. 76110</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>06/25/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>William Payne</b>	Amount of contribution (\$) <b>6.00</b>
Contributor address; City; State; Zip Code <b>2701 Benbrook Blvd Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>05/26/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Gordan Appleman</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>3855 Bellaire Cir Fort Worth, TX. 76109</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>05/13/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Alan Lake</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>3000 5th Avenue Fort Worth, TX. 76110</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/14/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Paul Millender</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>3121 Lipscomb St. Fort Worth, TX. 76110</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>left blank</b>	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>05/16/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Janie Frank</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>3517 Hilltop Rd Fort Worth, TX. 76109</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>06/09/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Elizabeth Parmer</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>309 W 7th Street #900 Fort Worth, TX. 76102</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/19/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Charles Dreyfus</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>2416 Park Place Ave Fort Worth, TX. 76110</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/13/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>M Beth Krugler</b>	Amount of contribution (\$) <b>300.00</b>
Contributor address; City; State; Zip Code <b>604 E Fourth Street #201 Fort Worth, TX. 76102</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>05/13/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Karen Lovett</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>2837 Townsend Dr. Fort Worth, TX. 76110</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>05/10/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mark Allen Stelmas</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>3237 Wabash Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/10/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lewis W. Shaw II</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>4890 Alpha Road #100 Dallas, TX. 75244</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/07/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Robert Herchert</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>4424 Bombay CT Fort Worth, TX. 76116</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>05/07/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>T Van Nay</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>1737 Oakland Fort Worth, TX. 76103</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>06/09/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mark Lucas Kelly</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>1321 Precinct Line Rd. Hurst, TX. 76053</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/23/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kevin Khorrami</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>7860 Skylake Drive Fort Worth, TX. 76179</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/25/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>William Payne</b>	Amount of contribution (\$) <b>6.00</b>
Contributor address; City; State; Zip Code <b>2701 Benbrook Blvd Fort Worth, TX. 76109</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>left blank</b>	7 Amount of contribution (\$)
	6 Contributor address; City; State; Zip Code	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>06/06/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Elizabeth Wills</b>	Amount of contribution (\$) <b>25.00</b>
	Contributor address; City; State; Zip Code <b>5440 Sierra Ridge Rd Fort Worth, TX. 76123</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>06/09/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Travis Parmer</b>	Amount of contribution (\$) <b>5.00</b>
	Contributor address; City; State; Zip Code <b>3622 Eldridge St. Fort Worth, TX. 76107</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>06/09/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kenneth Shetter</b>	Amount of contribution (\$) <b>100.00</b>
	Contributor address; City; State; Zip Code <b>1205 Yosemite Way Burleson, TX. 76028</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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>1</b>
2 FILER NAME <b>Ann Zadeh</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 20,000.00
5 Date of loan <b>04/30/2021</b>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) <b>Ann Zadeh</b>	9 Loan Amount (\$) <b>20,000.00</b>
6 Is lender a financial Institution?  Y N	8 Lender address; City; State; Zip Code	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION  <input type="checkbox"/> 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?  Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

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

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



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By 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: <u>9</u>	<b>2</b> FILER NAME <b>Ann Zadeh</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>04/28/2021</b>	<b>5</b> Payee name <b>Compete Digital LLC</b>	
<b>6</b> Amount (\$) <b>3,000.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>1317 Potomac Ave Washington DC 20003</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Consulting Expense</b>	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 <b>05/05/2021</b>	Payee name <b>ActBlue</b>	
Amount (\$) <b>277.78</b>	Payee address; City; State; Zip Code <b>PO Box 441146   Somerville, MA 02144-0031</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Fees</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>04/23/2021</b>	Payee name <b>Constant Contact</b>	
Amount (\$) <b>74.62</b>	Payee address; City; State; Zip Code <b>1601 Trapelo Road Ste 329 Waltham, MA. 02451</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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 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: <span style="float:right">9</span>	<b>2</b> FILER NAME <b>Ann Zadeh</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>05/05/2021</b>	<b>5</b> Payee name <b>Compete Digital LLC</b>	
<b>6</b> Amount (\$) <b>3,000.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>1317 Potomac Ave Washington DC 20003</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Consulting Expense</b>	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 <b>05/11/2021</b>	Payee name <b>ActBlue</b>	
Amount (\$) <b>899.19</b>	Payee address; City; State; Zip Code <b>PO Box 441146   Somerville, MA 02144-0031</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Fees</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>05/04/2021</b>	Payee name <b>Breinn Richter</b>	
Amount (\$) <b>3,440.46</b>	Payee address; City; State; Zip Code <b>1801 6th Avenue Fort Worth, TX. 76110</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Consulting Expense</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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 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)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>9</b>	2 FILER NAME <b>Ann Zadeh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>04/26/2021</b>	5 Payee name <b>Compete Digital LLC</b>	
6 Amount (\$) <b>1,000.00</b>	7 Payee address; City; State; Zip Code <b>Kyamran@nomadvizion.com</b>	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Video</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 <b>04/26/2021</b>	Payee name <b>Joey Retana</b>	
Amount (\$) <b>210.00</b>	Payee address; City; State; Zip Code <b>300 College Ave, Fort Worth, TX 76104</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>04/26/2021</b>	Payee name <b>Richard Davis</b>	
Amount (\$) <b>210.00</b>	Payee address; City; State; Zip Code <b>300 College Ave, Fort Worth, TX 76104</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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

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### 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: <span style="font-size: 2em; vertical-align: middle;">9</span>	<b>2</b> FILER NAME <b>Ann Zadeh</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>04/28/2021</b>	<b>5</b> Payee name <b>Fort Worth Weekly</b>	
<b>6</b> Amount (\$) <b>625.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>3311 Hamilton Ave. Fort Worth, TX. 76107</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 <b>05/05/2021</b>	Payee name <b>Joey Retana</b>	
Amount (\$) <b>442.50</b>	Payee address; City; State; Zip Code <b>300 College Ave, Fort Worth, TX 76104</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>05/03/2021</b>	Payee name <b>Richard Davis</b>	
Amount (\$) <b>442.50</b>	Payee address; City; State; Zip Code <b>300 College Ave, Fort Worth, TX 76104</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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: <u>9</u>	<b>2</b> FILER NAME <b>Ann Zadeh</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>05/03/2021</b>	<b>5</b> Payee name <b>Google LLC</b>	
<b>6</b> Amount (\$) <b>19.19</b>	<b>7</b> Payee address; City; State; Zip Code <b>G Suite 650 CA.</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) <b>Fees</b>	<b>(b) Description</b> <b>email accounts</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 <b>05/03/2021</b>	Payee name <b>PayPal</b>	
Amount (\$) <b>1.75</b>	Payee address; City; State; Zip Code <b>2211 N. First St San Jose, CA. 95131</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Fees</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

  

Date <b>05/04/2021</b>	Payee name <b>Travis Parmer</b>	
Amount (\$) <b>615.06</b>	Payee address; City; State; Zip Code <b>PO Box 11517 Fort Worth, TX. 76110</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Consulting Expense</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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 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.

1 Total pages Schedule F1: <b>9</b>	2 FILER NAME <b>Ann Zadeh</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>06/02/2021</b>	5 Payee name <b>Google LLC</b>
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6 Amount (\$) <b>19.19</b>	7 Payee address; <b>G Suite 650 CA.</b> City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Fees</b>	(b) Description <b>email accounts</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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Date <b>05/17/2021</b>	Payee name <b>PayPal</b>
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Amount (\$) <b>1.03</b>	Payee address; <b>2211 N. First St San Jose, CA. 95131</b> City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Fees</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>05/05/2021</b>	Payee name <b>Jasmine Connor</b>
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Amount (\$) <b>345.75</b>	Payee address; <b>1000 Henderson Street #311 Fort Worth, TX. 76102</b> City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Consulting Expense</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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: <span style="font-size: 2em; color: blue;">9</span>	<b>2</b> FILER NAME <b>Ann Zadeh</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>05/06/2021</b>	<b>5</b> Payee name <b>Compete Digital LLC</b>	
<b>6</b> Amount (\$) <b>55,011.02</b>	<b>7</b> Payee address; City; State; Zip Code <b>1317 Potomac Ave Washington DC 20003</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Consulting Expense</b>	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 <b>06/06/2021</b>	Payee name <b>PayPal</b>	
Amount (\$) <b>1.03</b>	Payee address; City; State; Zip Code <b>2211 N. First St San Jose, CA. 95131</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Fees</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

  

Date <b>05/12/2021</b>	Payee name <b>United States Postal Service</b>	
Amount (\$) <b>113.00</b>	Payee address; City; State; Zip Code <b>2600 8th Avenue Fort Worth, TX. 76110</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Fees</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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

**POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>9</b>	2 FILER NAME <b>Ann Zadeh</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>05/19/2021</b>	5 Payee name <b>Danny Ramos</b>
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6 Amount (\$) <b>1,100.00</b>	7 Payee address; <b>1817 Harrington Ave, Fort Worth, TX 76164</b>	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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Date <b>05/26/2021</b>	Payee name <b>Tractor Supply</b>
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Amount (\$) <b>-151.11</b>	Payee address; <b>9249 Benbrook Blvd Benbrook, TX. 76126</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Refund for returned product</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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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Date <b>05/28/2021</b>	Payee name <b>The Rental Shop</b>
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Amount (\$) <b>1,350.75</b>	Payee address; <b>2935 Eagle Dr. Grand Prairie, TX. 75052</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Event Expenses</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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: <span style="font-size: 2em; color: blue;">9</span>	<b>2</b> FILER NAME <b>Ann Zadeh</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>06/03/2021</b>	<b>5</b> Payee name <b>ActBlue</b>	
<b>6</b> Amount (\$) <b>52.53</b>	<b>7</b> Payee address; City; State; Zip Code <b>PO Box 441146   Somerville, MA 02144-0031</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>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 <b>06/09/2021</b>	Payee name <b>ActBlue</b>	
Amount (\$) <b>99.66</b>	Payee address; City; State; Zip Code <b>PO Box 441146   Somerville, MA 02144-0031</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Fees</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date <b>06/09/2021</b>	Payee name <b>The Strategy Group, Inc.</b>	
Amount (\$) <b>9,000.00</b>	Payee address; City; State; Zip Code <b>730 N Franklin #404 Chicago IL. 60654</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Consulting Expense</b>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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



# UNPAID INCURRED OBLIGATIONS

# SCHEDULE F2

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

### EXPENDITURE CATEGORIES FOR BOX 10(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<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
|   | 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 F2: <b>1</b>	<b>2</b> FILER NAME <b>Ann Zadeh</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		<b>\$ 5,600.00</b>
<b>5</b> Date <b>06/09/2021</b>	<b>6</b> Payee name <b>The Strategy Group, Inc.</b>	
<b>7</b> Amount (\$) <b>5,600.00</b>	<b>8</b> Payee address; City; State; Zip Code <b>730 N Franklin #404 Chicago IL. 60654</b>	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description
	<b>Consulting Expense</b>	
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>11</b> 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	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 PERSONAL FUNDS

## SCHEDULE G

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 G: <b>1</b>	<b>2</b> FILER NAME <b>Ann Zadeh</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>05/26/21</b>	<b>5</b> Payee name <b>United States Postal Service</b>	
<b>6</b> Amount (\$) <b>\$110.00</b> <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code <b>3101 W 6th Street Fort Worth, TX. 76107</b>	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Fees</b>	<b>(b)</b> Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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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