

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

39

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Mr. Philip J.
RITTER

OFFICE USE ONLY

Date Received

RECEIVED

APR 28 2022

Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX

APT / SUITE #

CITY

STATE

ZIP CODE

Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214) 676-3112

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Ms. Regan
Horchow

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #

CITY

STATE

ZIP CODE

1918 Olive Street
Dallas, TX 75201

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214) 676-3112

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

03

29

22

THROUGH

Month

Day

Year

04

27

22

11 ELECTION

ELECTION DATE

Month

Day

Year

05

07

22

Primary

Runoff

Other

Description

General

Special

12 OFFICE

OFFICE HELD (if any)

Dallas College Trustee Dist. 2

13 OFFICE SOUGHT (if known)

Dallas College Trustee Dist. 2

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

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Philip J. Ritter		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 77,720.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 14,074.96
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 60,220.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,000.00

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.

Philip J. Ritter

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is **Philip J. Ritter**, and my date of birth is [REDACTED]

My address is [REDACTED]

Executed in **DRUG** (street) County, State of **TEXAS** (state), on the **28** (city) day of **APRIL** (state) (zip code) 20 **22** (country) (month) (year)

Philip J. Ritter
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME***Philip Ritten***20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 67,570. ⁰⁰
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 10,150. ⁰⁰
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 14,094.98
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
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	\$
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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME Philip Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4/2/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Susan J. Fazio	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 2507 Auburn Ave Dallas TX 75214		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/2/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kathleen Ann Foley	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 7500 W. Lake Mead Blvd Las Vegas, NV 89125		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/9/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: UM SITEETS	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 5930 Royal Lmk Suite E111 Dallas, TX 75230		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/5/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: PAT LOCKARD	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 14608 Brookwood Lmk Addison, TX 75001		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **28**

2 FILER NAME **PHILIP J. RITTER**

3 Filer ID (Ethics Commission Filers)

4 Date
4/4/22

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
AMEY ABRAMSON

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
**5509 NICHOLSON LANE #1104
N. BETHESDA, MD 20852**

\$10,000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID#: _____)
CLINT Mc DONALD

Amount of contribution (\$)

4-3-22

Contributor address; City; State; Zip Code
**4806 BUFFUMER BLVD
DALLAS TX 75209**

\$1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID#: _____)
LISA MEYER

Amount of contribution (\$)

4-3-22

Contributor address; City; State; Zip Code
**4635 SUGAR MILE DRIVE
DALLAS, TX 75244**

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID#: _____)
ROBERT RICHMOND

Amount of contribution (\$)

4-3-22

Contributor address; City; State; Zip Code
**6904 TOLSON
DALLAS TEXAS 75214**

\$1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

12,100/
13,350

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME Philip J. Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4-3-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: RON STEINHAUER	7 Amount of contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 25 ROBLEY DR. DALLAS, TX 75230		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 4/4/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: MARY J. MONICK	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 6325 W. NORTHWEST HWY DALLAS, TX 75225		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 4/4/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ANN MARCIN	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 2828 17000 STREET #1604 DALLAS, TX 75219		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/7/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: TIM POWERS	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 2355 THOMAS AVE DALLAS TX 75201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME PHILIP J. RITTER		3 Filer ID (Ethics Commission Filers)
4 Date 4/6/22	5 Full name of contributor out-of-state PAC (ID#: CHARLES SMARTIN	7 Amount of contribution (\$) \$300.00
6 Contributor address; City; State; Zip Code 6322 NORTHWOOD DALLAS, TX 75225		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) GMA - REEP
Date 4/6/22	Full name of contributor out-of-state PAC (ID#: DIME GENTILE	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 11519 SONNET DR. DALLAS TX 75229		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/7/22	Full name of contributor out-of-state PAC (ID#: RUSSELL NEWHOUSE	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 7507 CENTENARY AVE DALLAS TX 75225		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/7/22	Full name of contributor out-of-state PAC (ID#: ARTHUR HALLINGSWORTH	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 6500 OLD GATE PLANO, TX 75024		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 25
2 FILER NAME PHILIP J. BITTER		3 Filer ID (Ethics Commission Filers)
4 Date 4/7/22	5 Full name of contributor KATHERINE McGOWN out-of-state PAC (ID#: 6 Contributor address: 4364 ROBIN LANE DMUS, TX 75229 City; State; Zip Code	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions)
Date 4/7/22	Full name of contributor BOB MARSHALL out-of-state PAC (ID#: Contributor address: 18948 RAVENHILL CT. DMUS, TX 75287 City; State; Zip Code	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/7/22	Full name of contributor LEHMAN BURK out-of-state PAC (ID#: Contributor address: 8215 WESTCHESTER, SUITE 207 DMUS TX 75225 City; State; Zip Code	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions)
Date 4/7/22	Full name of contributor GAYLE RESINGER out-of-state PAC (ID#: Contributor address: 5015 STANLICH AVE DMUS TX 75235 City; State; Zip Code	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME Philip J. Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4-7-22	5 Full name of contributor William Solomon out-of-state PAC (ID#:	7 Amount of contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 100 CRESCENT COURT SUITE 880 DALLAS TX 75201		
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) O'Donnell Foundation
Date 4-7-22	Full name of contributor Adrienne Kennedy out-of-state PAC (ID#:	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 511 KONSTANTIN CIRCLE WEST LAKE HILLS, TX 78746		
Principal occupation / Job title (See Instructions) VOLUNTEER		Employer (See Instructions) NAMI
Date 4-7-22	Full name of contributor Richard Agnich out-of-state PAC (ID#:	Amount of contribution (\$) \$1000.00
Contributor address; City; State; Zip Code 11 CHELTHAM WAY DALLAS TX 75230		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 4-7-22	Full name of contributor Marguerite Hoffman out-of-state PAC (ID#:	Amount of contribution (\$) \$1000.00
Contributor address; City; State; Zip Code 9963 ROCKBROOK DR. DALLAS TX 75220		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME Philip J. Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4/7/22	5 Full name of contributor out-of-state PAC (ID#: Bruce Esterline	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 4129 Buena Vista Dallas, TX 75204		
8 Principal occupation / Job title (See Instructions) Senior Advisor		9 Employer (See Instructions) Meredith Foundation
Date 4/7/22	Full name of contributor out-of-state PAC (ID#: BETH SOSIDKA	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2901 Cityplace West Blvd Dallas, TX 75204		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/7/22	Full name of contributor out-of-state PAC (ID#: GREG CAMPBELL	Amount of contribution (\$) \$150.00
Contributor address; City; State; Zip Code 2323 N. Houston Street #411 Dallas TX 75219		
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Runnaker, Inc.
Date 4/7/22	Full name of contributor out-of-state PAC (ID#: Michael Williams	Amount of contribution (\$) \$1000.00
Contributor address; City; State; Zip Code 2604 Garden Ridge Lane Arlington TX 76006		
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) UNT - Dallas

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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: 26
2 FILER NAME Philip Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4/7/22	5 Full name of contributor out-of-state PAC (ID#: DEEDIE ROSE	7 Amount of contribution (\$) \$1000.00
6 Contributor address; City; State; Zip Code 5 WILLOW WOOD CIRCLE DALLAS TX 75205		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 4/7/22	Full name of contributor out-of-state PAC (ID#: JOSEPH BLAIR	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 11239 SHELTERWOOD LN. DALLAS TX 75229		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/7/22	Full name of contributor out-of-state PAC (ID#: REGEN HORCHOW	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 1918 N. OLIVE STREET #603 DALLAS TX 75201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/7/22	Full name of contributor out-of-state PAC (ID#: MICHAEL HERSCHAMM	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 6607 STEPHANI DRIVE DALLAS TX 75225		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME Philip Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4/7/22	5 Full name of contributor Melinda Beme out-of-state PAC (ID#: 6 Contributor address; 5010 Purdue Ave Dallas TX 75207 City; State; Zip Code	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) COO		9 Employer (See Instructions) NXX GOLF
Date 4/8/22	Full name of contributor Peggy Carter out-of-state PAC (ID#: Contributor address; 5147 Horseshoe Trail Dallas TX 75209 City; State; Zip Code	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 4/8/22	Full name of contributor David Hopson out-of-state PAC (ID#: Contributor address; 6626 Northwood Rd Dallas TX 75225 City; State; Zip Code	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) DHT CREATIVE
Date 4/8/22	Full name of contributor George DeShazo out-of-state PAC (ID#: Contributor address; 2705 Clearview Dr Austin, TX 78703 City; State; Zip Code	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME Philip Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4/8/22	5 Full name of contributor out-of-state PAC (ID#: Dave Wilcox	7 Amount of contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 4532 ALTA VISTA LANE DALLAS, TX 75229		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/8/22	Full name of contributor out-of-state PAC (ID#: RODNEY SCHLOSSER	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 6336 TULIP LANE DALLAS TX 75230		
Principal occupation / Job title (See Instructions) SUP		Employer (See Instructions) ASURION
Date 4/8/22	Full name of contributor out-of-state PAC (ID#: SUZANNE SMITH	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3210 CARUSLE DALLAS TX 75204		
Principal occupation / Job title (See Instructions) SOCIAL ENTREPRENEUR		Employer (See Instructions)
Date 4/9/22	Full name of contributor out-of-state PAC (ID#: Dan Mickle	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 1140 BRANCH MORE DRIVE DALLAS TX 75218		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **26**

2 FILER NAME **PHILIP R. ITEL**

3 Filer ID (Ethics Commission Filers)

4 Date
4/9/22

5 Full name of contributor ☐ out-of-state PAC (ID#:
JIM ADAMS

7 Amount of contribution (\$)

\$500.00

6 Contributor address; City; State; Zip Code
**209 GENESEE ROAD
SAN ANTONIO, TX 78209**

8 Principal occupation / Job title (See Instructions)
RETIRED

9 Employer (See Instructions)

Date
4/9/22

Full name of contributor ☐ out-of-state PAC (ID#:
SM SELF

Amount of contribution (\$)

\$500.00

Contributor address; City; State; Zip Code
**6918 ORK MINOR DR.
DALLAS TX 75230**

Principal occupation / Job title (See Instructions)
RETIRED

Employer (See Instructions)

Date
4/9/22

Full name of contributor ☐ out-of-state PAC (ID#:
BOBBY LYLE

Amount of contribution (\$)

\$1000.00

Contributor address; City; State; Zip Code
**6688 N. CENTRAL EXPY
DALLAS, TX 75206**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
4/9/22

Full name of contributor ☐ out-of-state PAC (ID#:
WILLIAM MARPLE

Amount of contribution (\$)

\$500.00

Contributor address; City; State; Zip Code
**7028 CHIPPERTON DR
DALLAS TX 75225**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 26
2 FILER NAME Philip Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4.14.22	5 Full name of contributor out-of-state PAC (ID#: Donna Humes	7 Amount of contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 3225 Louisa Lane Dallas TX 75225		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4-14-22	Full name of contributor out-of-state PAC (ID#: Todd Williams	Amount of contribution (\$) Todd Williams \$2,500.00
Contributor address; City; State; Zip Code 3889 Maple Ave Suite 350 Dallas TX 75219		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-14-22	Full name of contributor out-of-state PAC (ID#: PETE SCHENKEL	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code 614 N. Bishop Stz 3 Dallas, TX 75208		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 4-14-22	Full name of contributor out-of-state PAC (ID#: John B. Lowe, Jr.	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 4948 Briarwood Place Dallas, TX 75209		
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: 26
2 FILER NAME Philip J. Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4-15-22	5 Full name of contributor Hunter Hunt out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code 1900 N. ALAMO DR. DALLAS TX 75201	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4-15-22	Full name of contributor Orin Hunt out-of-state PAC (ID#: Contributor address; City; State; Zip Code 1900 N. ALAMO, DALLAS TX 75201	Amount of contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-15-22	Full name of contributor CHRIS WILKIE out-of-state PAC (ID#: Contributor address; City; State; Zip Code 4235 CASTLE ROCK CT. IRVING, TX 75038	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-15-22	Full name of contributor MICHAEL GAGNE out-of-state PAC (ID#: Contributor address; City; State; Zip Code 1455 DATES DRIVE DALLAS, TX 75228	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME Pittip R. Iyer		3 Filer ID (Ethics Commission Filers)
4 Date 4-15-22	5 Full name of contributor out-of-state PAC (ID#: SMO. CHAMM	7 Amount of contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code 3609 HANNE AVE DALLAS TX 75205		
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) CBH - JDNHS
Date 4-15-22	Full name of contributor out-of-state PAC (ID#: MARY PAT HILLINGS	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 9216 HETTERDALE DR DALLAS TX 75243		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) HOLOCAUST MUSEUM
Date 4-15-22	Full name of contributor out-of-state PAC (ID#: JIM KERR, JR	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2817 STAMFORD AVE DALLAS TX 75225		
Principal occupation / Job title (See Instructions) JUDGE (ret.)		Employer (See Instructions)
Date 4-15-22	Full name of contributor out-of-state PAC (ID#: KEVIN HALL	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 6304 TULIP CME DALLAS TX 75230		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) GUNT HALLIBURTON FOUNDATION
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME Philip Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4-15-22	5 Full name of contributor Aaron Conley out-of-state PAC (ID#: 6 Contributor address; 1505 COTTINGHAM CT. COPPELL, TX 75019 City; State; Zip Code	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions)
Date 4-15-22	Full name of contributor JEFF & DARREL RICE out-of-state PAC (ID#: Contributor address; 6830 WOODLAND DR DALLAS TX 75225 City; State; Zip Code	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RET.		Employer (See Instructions)
Date 4-15-22	Full name of contributor Ann McRaven out-of-state PAC (ID#: Contributor address; 1906 MOUNTAINVIEW RD. AUSTIN, TX 78703 City; State; Zip Code	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 4-15-22	Full name of contributor ANDY STERN out-of-state PAC (ID#: Contributor address; 5916 CLUB OAKS DR. DALLAS TX 75248 City; State; Zip Code	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME Philip J. Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4-17-22	5 Full name of contributor out-of-state PAC (ID#: Lynn Washam 6 Contributor address; City; State; Zip Code 3720 Maplewood Dr. TX 75205	7 Amount of contribution (\$) \$250 \$250.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) JONES, Russ - Fidelity
Date 4-17-22	Full name of contributor out-of-state PAC (ID#: Caren Protter Contributor address; City; State; Zip Code 3929 Potomac Ave Dallas, TX 75205	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) RET.		Employer (See Instructions)
Date 4-17-22	Full name of contributor out-of-state PAC (ID#: WALTER WMAE Contributor address; City; State; Zip Code 120 RIFLEX DRIVE RICHARDSON, TX 75081	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) HARRIS
Date 4-17-22	Full name of contributor out-of-state PAC (ID#: TIM BYRNE Contributor address; City; State; Zip Code 2000 MCKINNEY AVE, STE 1000 DALLAS, TX 75201	Amount of contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 26
2 FILER NAME Philip J. Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4-17-22	5 Full name of contributor JAN LIPSCOMB out-of-state PAC (ID#: 6 Contributor address; 5908 WAGNER DR. DALLAS TX 75230 City; State; Zip Code	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) LIPSCOMB INSURANCE
Date 4-17-22	Full name of contributor ERIC CONNER out-of-state PAC (ID#: Contributor address; 2840 FORDEN DR. DALLAS TX 75205 City; State; Zip Code	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-17-22	Full name of contributor MICHAEL WILLIAMS out-of-state PAC (ID#: Contributor address; 2604 GARDEN RIDGE LN ARLINGTON TX 76006 City; State; Zip Code	Amount of contribution (\$) \$1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-17-22	Full name of contributor ANDREW LONGYEAR out-of-state PAC (ID#: Contributor address; 5831 HARVEST HILL RD #1069 DALLAS TX 75230 City; State; Zip Code	Amount of contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 26
2 FILER NAME PHILIP J. RITTER		3 Filer ID (Ethics Commission Filers)
4 Date 4-17-22	5 Full name of contributor out-of-state PAC (ID#: DAVID KANUSE	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 3224 BASIL COURT DALLAS TX 75204		
8 Principal occupation / Job title (See Instructions) RET.		9 Employer (See Instructions)
Date 4-17-22	Full name of contributor out-of-state PAC (ID#: WILL HARTNETT	Amount of contribution (\$) \$150.00
Contributor address; City; State; Zip Code 2920 N. PEARL ST. DALLAS, TX 75201		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)
Date 4-17-22	Full name of contributor out-of-state PAC (ID#: WYATT ROUSSEAU	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 879 COTSWOODS CT RICHARDSON, TX 75081		
Principal occupation / Job title (See Instructions) RET.		Employer (See Instructions)
Date 4-17-22	Full name of contributor out-of-state PAC (ID#: MARGARET MILLIGAN	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code 5918 WILLIAMSTOWN RD DALLAS, TX 75230		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 26
2 FILER NAME Philip J. Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4-17-22	5 Full name of contributor out-of-state PAC (ID#: JANICE BAPTISTE 6 Contributor address; City; State; Zip Code 4820 CLOUDCROFT LN. IRVING, TX 75038	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions)
Date 4-17-22	Full name of contributor out-of-state PAC (ID#: JERRY POGUTSCH Contributor address; City; State; Zip Code 4 BIRCHMONT LANE DALLAS TX 75230	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Ret		Employer (See Instructions)
Date 4-17-22	Full name of contributor out-of-state PAC (ID#: Tom ENCIBOUS Contributor address; City; State; Zip Code 20 SHADY BEND DR. MCKINNEY TX 75454	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Ret		Employer (See Instructions)
Date 4-10-22	Full name of contributor out-of-state PAC (ID#: JOHN WENSINGER Contributor address; City; State; Zip Code 4350 LIVELY LANE ORLANDO, TX 75220	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME PHILIP RITTER		3 Filer ID (Ethics Commission Filers)
4 Date 4.17.22	5 Full name of contributor out-of-state PAC (ID#: CINDY STOLTZ	7 Amount of contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 5642 W. HAMMERT AVE DALLAS TX 75209		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4.18.22	Full name of contributor out-of-state PAC (ID#: MENDORS OZAROW	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 5103 W. HAMMERT AVE DALLAS TX 75209		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-18-22	Full name of contributor out-of-state PAC (ID#: LINDA MCFURLO	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 8829 MCCRAW DR DALLAS TX 75209		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4.18.22	Full name of contributor out-of-state PAC (ID#: DARRIN BORUFF	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 6445 LARK CIRCLE DR. DALLAS TX 75214		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 26
2 FILER NAME Philip Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4.19.22	5 Full name of contributor out-of-state PAC (ID#: Jonathan Childers	7 Amount of contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code 5330 Emerson Ave Dallas TX 75209		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 4.19.22	Full name of contributor out-of-state PAC (ID#: Steven Lyle	Amount of contribution (\$) \$1000.00
Contributor address; City; State; Zip Code 5904 Elderwood Dr Dallas TX 75230		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4.19.22	Full name of contributor out-of-state PAC (ID#: Ken Benson	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 1527 Waterside Ct Dallas TX 75218		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4.19.22	Full name of contributor out-of-state PAC (ID#: Rob + Donna Hull	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 10417 Coppock Lane Dallas TX 75229		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME PHILIP J. RITTER		3 Filer ID (Ethics Commission Filers)
4 Date 4.19.22	5 Full name of contributor out-of-state PAC (ID#: RICHARD + CATHY WING	7 Amount of contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code 10816 ALPINE DR DALLAS TX 75229		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4.19.22	Full name of contributor out-of-state PAC (ID#: LISA BROWN GILL	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 5905 STILL FOREST DR DALLAS, TX 75252		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4.20.22	Full name of contributor out-of-state PAC (ID#: Ann Raymond	Amount of contribution (\$) \$1000.00
Contributor address; City; State; Zip Code 4111 W. LAURENCE DR DALLAS TX 75214		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4.20.22	Full name of contributor out-of-state PAC (ID#: GRANT VAN CLEVE	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3701 TURTLE CREEK BLVD 3A DALLAS TX 75219		
Principal occupation / Job title (See Instructions) RITTER		Employer (See Instructions) BALLOON FREEMAN
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 28

2 FILER NAME

PHILIP RITTER

3 Filer ID (Ethics Commission Filers)

4 Date

4.20.22

5 Full name of contributor

out-of-state PAC (ID#:

KIRK WILSON

7 Amount of contribution (\$)

\$500.00

6 Contributor address;

City;

State;

Zip Code

10739 BAIRD HOLLOW CT
DALLAS TX 75229

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4.20.22

Full name of contributor

out-of-state PAC (ID#:

WILLIAM BANCROFT

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

938 W. GREENBURN LN.
DALLAS TX 75208

Principal occupation / Job title (See Instructions)

PRINCIPAL

Employer (See Instructions)

CONBRIO

Date

4.19.22

Full name of contributor

out-of-state PAC (ID#:

DON BUCKROD

Amount of contribution (\$)

200.00

Contributor address;

City;

State;

Zip Code

2 VENTNATH #1104
DALLAS TX 75225

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

Date

4.19.22

Full name of contributor

out-of-state PAC (ID#:

WIKKI MARTIN

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

8230 CLEMENT DR
DALLAS TX 75228

Principal occupation / Job title (See Instructions)

EXEC. DIR.

Employer (See Instructions)

FRI

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME PHILIP RITTER		3 Filer ID (Ethics Commission Filers)
4 Date 4.21.22	5 Full name of contributor out-of-state PAC (ID#: DURGANK KAMATH 6 Contributor address; City; State; Zip Code 2521 FITZGERALD AVE MCKINNEY, TX 75071	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) CFO		9 Employer (See Instructions) GREENLIGHT CREATIONS
Date 4.21.22	Full name of contributor out-of-state PAC (ID#: RALPH & HARRIET COUSINS Contributor address; City; State; Zip Code 5802 REDWOOD CT. DALLAS, TX 75209	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 4-21-22	Full name of contributor out-of-state PAC (ID#: KAREN HUNT Contributor address; City; State; Zip Code 903 PELICAN LANE COPPELL, TX 75019	Amount of contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) UP		Employer (See Instructions) FROST BANK
Date 4.22.22	Full name of contributor out-of-state PAC (ID#: TERRY DEMLER Contributor address; City; State; Zip Code 8302 RIDGELEA ST. DALLAS TX 75209	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 26
2 FILER NAME Philip Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4.22.22	5 Full name of contributor out-of-state PAC (ID#: JEFF THOMPSON	7 Amount of contribution (\$) \$1000.00
6 Contributor address; City; State; Zip Code 3609 CENTENNIAL AVE DALLAS TX 75225		
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) AMBIT
Date 4.22.22	Full name of contributor out-of-state PAC (ID#: Philip Wiggins	Amount of contribution (\$) \$3000.00
Contributor address; City; State; Zip Code 5949 SHERRY LANE #800 DALLAS TX 75201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4.22.22	Full name of contributor out-of-state PAC (ID#: MATT WALLER	Amount of contribution (\$) \$1000.00
Contributor address; City; State; Zip Code 5828 COLTURS ST DALLAS TX 75230		
Principal occupation / Job title (See Instructions) ENTREPRENEUR PRINCIPAL		Employer (See Instructions) CAPITAL CAPITAL
Date 4.23.22	Full name of contributor out-of-state PAC (ID#: MARY STEELE	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code 7606 MENDOZA RD DALLAS TX 75236		
Principal occupation / Job title (See Instructions) RET.		Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 25
2 FILER NAME Philip Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4-23-22	5 Full name of contributor out-of-state PAC (ID#: Bob Ferguson	7 Amount of contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 5400 GLENSHIRE DR. PLANO, TX 75093		
8 Principal occupation / Job title (See Instructions) Ret.		9 Employer (See Instructions) TDI
Date 4-23-22	Full name of contributor out-of-state PAC (ID#: LINDBERGER, GREGG, BLAIR & SIMPSON	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 8616 FORT CRICK A 2777 N. STEMMONS, STE 1000 DALLAS TX 75207		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-23-22	Full name of contributor out-of-state PAC (ID#: FRANK MATHLOPOULOS	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 4645 N. CENTRAL EXPY DALLAS TX 75205		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-24-22	Full name of contributor out-of-state PAC (ID#: GARY MYLES	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 5720 RIDGEMAN DR. PLANO TX 75093		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME Philip Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4-24-22	5 Full name of contributor Raymond Woodridge out-of-state PAC (ID#: 6 Contributor address; 7808 Glenham Circle Darius Tx 75225 City; State; Zip Code	7 Amount of contribution (\$) \$1000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 4/24/22	Full name of contributor Nina Roford out-of-state PAC (ID#: Contributor address; 7249 Ashington Dr Darius Tx 75225 City; State; Zip Code	Amount of contribution (\$) \$1000.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Cooper Clinic
Date 4/24/22	Full name of contributor Luther Harris out-of-state PAC (ID#: Contributor address; 7319 Lizstake Ave Darius Tx 75231 City; State; Zip Code	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Texas Instruments
Date 4/25	Full name of contributor Hiram Crow out-of-state PAC (ID#: Contributor address; 3819 Marz Ave Darius, Tx 75217 City; State; Zip Code	Amount of contribution (\$) \$2500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Crow Holdings
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28
2 FILER NAME Philip Ritter		3 Filer ID (Ethics Commission Filers)
4 Date 4-25-22	5 Full name of contributor NILE BRENNER out-of-state PAC (ID#: 6 Contributor address; 2 VENTURA WAY DALLAS TX 75225 City; State; Zip Code	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) 2 VENTURA WAY DALLAS TX 75225		9 Employer (See Instructions)
Date 4/26/22	Full name of contributor GARY LAWRENCE out-of-state PAC (ID#: Contributor address; 3949 MAPLE AVE DALLAS, TX 75219 City; State; Zip Code	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) PRINCIPAL		Employer (See Instructions) LAWRENCE PARTNERS
Date 4/26/22	Full name of contributor DIMA FLORES out-of-state PAC (ID#: Contributor address; 1134 MOUNTAIN LAKE ROAD DALLAS TX 75224 City; State; Zip Code	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) G-DHCC
Date	Full name of contributor out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 2	
2 FILER NAME PHILIP J. RUTER		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 4/20	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: MARTIN FORTE	8 Amount of Contribution \$ \$270.00	9 In-kind contribution description FOOD & BEVERAGES
7 Contributor address; City; State; Zip Code 4309 ALTA VISTA RD. DALLAS TX 75229		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) HOME WORKER		11 Employer (FOR NON-JUDICIAL) (See Instructions) NA	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 4/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: DALLAS KIDS FIRST. MARIAPPEL	Amount of Contribution \$ 9,680.00	In-kind contribution description TEXTING DOLL TO DOLL, STITCHES
Contributor address; City; State; Zip Code 4447 CENTRAL EXP DALLAS TX 75205		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) WORKER		Employer (FOR NON-JUDICIAL) (See Instructions) DALLAS KIDS FIRST	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **2**

2 FILER NAME **Philip Ritter**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5 Date
4/25

6 Full name of contributor ☐ out-of-state PAC (ID#:

Reagan Horowitz

8 Amount of Contribution \$
\$200.00

9 In-kind contribution description
Food/Beverage for event

7 Contributor address; City; State; Zip Code
1918 OLIVE ST. DALLAS, TX 75201

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor ☐ out-of-state PAC (ID#:

Amount of Contribution \$

In-kind contribution description

Contributor address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6	2 FILER NAME PHILIP RITTER	3 Filer ID (Ethics Commission Filers)
4 Date 4-11-22	5 Payee name CP HENRY	
6 Amount (\$) \$6843.93	7 Payee address; 9322 MOSS TRAIL DALLAS, TX 75231	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PRINTING, CONSULTING	(b) Description 4 MO SSLS, WEB PAGE, CONSULTING FEE
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4-17-22	Payee name LINDA ROGERS - STRATEGY FIRST TECHNOLOGIES	
Amount (\$) \$3,000.00	Payee address; 11008 ROSSEL ROAD DALLAS, TX 75229	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) CONSULTING	Description CAMPAIGN CONSULTING FEES, MAILING LISTS
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4-6-22	Payee name AMEDOT	
Amount (\$) \$125.00	Payee address; 1340 POWERS ST NEW ORLEANS LA 70112	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FEES	Description ONLINE DONATION FEES
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6	2 FILER NAME Philip J. Ritter	3 Filer ID (Ethics Commission Filers)
4 Date 4-7-22	5 Payee name AMEDOT	
6 Amount (\$) \$42.60	7 Payee address; City; State; Zip Code 1340 Poyons St New Orleans LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FEES	(b) Description Online Donation Fees
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4-11-22	Payee name AMEDOT	
Amount (\$) \$371.50	Payee address; City; State; Zip Code 1340 Poyons St New Orleans LA 70112	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FEES	Description Online Donation Fees
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4-13-22	Payee name AMEDOT	
Amount (\$) \$143.30	Payee address; City; State; Zip Code 1340 Poyons St New Orleans LA 70112	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FEES	Description Online Donation Fees
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6		2 FILER NAME Philip J. Ritter		3 Filer ID (Ethics Commission Filers)	
4 Date 4-13-22		5 Payee name MEPOT			
6 Amount (\$) \$151.00		7 Payee address; City; State; Zip Code 1340 PONDREY ST New Orleans LA 70112			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FEES		(b) Description Online Donation FEES		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 4-15-22		Payee name MEPOT			
Amount (\$) \$166.10		Payee address; City; State; Zip Code 1340 PONDREY ST New Orleans, LA 70112			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FEES		Description Online Donation FEES		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 4.19.22		Payee name MEPOT			
Amount (\$) 113.20		Payee address; City; State; Zip Code 1340 PONDREY ST New Orleans, LA 70112			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FEES		Description Online Donation FEES		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6		2 FILER NAME Philip Ritter		3 Filer ID (Ethics Commission Filers)	
4 Date 4-20-22		5 Payee name AMEDOT			
6 Amount (\$) \$14.60		7 Payee address; 1340 PONDERS ST. NEW ORLEANS, LA		City; 70112	State; LA
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FEES		(b) Description Online Donation Fees		
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4-21-22		Payee name AMEDOT			
Amount (\$) \$122.40		Payee address; 1340 PONDERS ST. NEW ORLEANS, LA		City; 70112	State; LA
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FEES		Description Online Donation Fees		
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/18/22		Payee name ADRIAN BARKE			
Amount (\$) \$1310.00		Payee address; 11223 WOODBRUM TRAIL DALLAS TX		City; 75229	State; TX
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) CONSULTING FEES		Description EVENTS, SIGNS, SUPPORT		
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6		2 FILER NAME Philip Ritten		3 Filer ID (Ethics Commission Filers)	
4 Date 4/26/22		5 Payee name Ventura			
6 Amount (\$) \$322.65		7 Payee address; City; State; Zip Code 2 Ventura Way Dallas TX 75225			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) RECEPTION		(b) Description Drinks, Snacks		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 4/26/22		Payee name Adrian Bakke			
Amount (\$) \$990.50		Payee address; City; State; Zip Code 11223 Wondemmo Trail Dallas, TX 75229			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Brooklyn CC Event Expense		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 4/25/22		Payee name MEDOT			
Amount (\$) \$303.00		Payee address; City; State; Zip Code 1340 Poydms St New Orleans, LA 70112			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Online Donation Fees		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6		2 FILER NAME PHILIP RITTER		3 Filer ID (Ethics Commission Filers)	
4 Date 4-27-22		5 Payee name AMEDOT			
6 Amount (\$) \$50.60		7 Payee address: 1340 PONDAMS ST. NEW ORLEANS, LA 70112		City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FEES		(b) Description Online Donation Fees		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4-27-22		Payee name AMEDOT			
Amount (\$) \$24.60		Payee address: 1340 PONDAMS ST. NEW ORLEANS, LA 70112		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FEES		Description Online Donation Fees		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date		Payee name			
Amount (\$)		Payee address;		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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