

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: <div style="text-align: center; font-size: 24px; font-weight: bold;">5</div>																			
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 8px;">MS / MRS / MR</td> <td style="width:35%; text-align: center; font-size: 18px; font-weight: bold;">Mrs. Natalie</td> <td style="width:15%; text-align: center; font-size: 18px; font-weight: bold;">M.</td> <td style="width:35%;"></td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td style="text-align: center; font-size: 18px; font-weight: bold;">Hebert</td> <td style="font-size: 8px;">MI</td> <td style="font-size: 8px;">SUFFIX</td> </tr> <tr> <td style="font-size: 8px;">FIRST</td> <td style="text-align: center; font-size: 18px; font-weight: bold;">Natalie</td> <td style="font-size: 8px;">LAST</td> <td style="font-size: 8px;">SUFFIX</td> </tr> </table>	MS / MRS / MR	Mrs. Natalie	M.		NICKNAME	Hebert	MI	SUFFIX	FIRST	Natalie	LAST	SUFFIX	OFFICE USE ONLY								
MS / MRS / MR	Mrs. Natalie	M.																				
NICKNAME	Hebert	MI	SUFFIX																			
FIRST	Natalie	LAST	SUFFIX																			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: 8px;">ADDRESS / PO BOX;</td> <td style="width:25%; font-size: 8px;">APT / SUITE #;</td> <td style="width:25%; font-size: 8px;">CITY;</td> <td style="width:25%; font-size: 8px;">STATE;</td> <td style="width:20%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td>6509 Simon Ave.</td> <td></td> <td>Frisco TX</td> <td></td> <td>75035</td> </tr> </table>	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	6509 Simon Ave.		Frisco TX		75035	Date Received <div style="font-size: 24px; font-weight: bold; text-align: center;">APR 26 2019</div> <div style="text-align: center; color: blue; font-family: cursive;">Kc</div>										
ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE																		
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FIRST	Kelsey	LAST	SUFFIX																			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%; font-size: 8px;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:15%; font-size: 8px;">APT / SUITE #;</td> <td style="width:15%; font-size: 8px;">CITY;</td> <td style="width:15%; font-size: 8px;">STATE;</td> <td style="width:10%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td>6369 Postell Lane</td> <td></td> <td>Frisco TX</td> <td></td> <td>75035</td> </tr> </table>			STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE	6369 Postell Lane		Frisco TX		75035									
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; text-align: center; font-size: 8px;">Month</td> <td style="width:25%; text-align: center; font-size: 8px;">Day</td> <td style="width:25%; text-align: center; font-size: 8px;">Year</td> <td style="width:25%;"></td> <td style="width:25%; text-align: center; font-size: 8px;">Month</td> <td style="width:25%; text-align: center; font-size: 8px;">Day</td> <td style="width:25%; text-align: center; font-size: 8px;">Year</td> </tr> <tr> <td style="text-align: center; font-size: 24px; font-weight: bold;">03</td> <td style="text-align: center; font-size: 24px; font-weight: bold;">/ 26</td> <td style="text-align: center; font-size: 24px; font-weight: bold;">2019</td> <td style="text-align: center; font-weight: bold;">THROUGH</td> <td style="text-align: center; font-size: 24px; font-weight: bold;">04</td> <td style="text-align: center; font-size: 24px; font-weight: bold;">/ 26</td> <td style="text-align: center; font-size: 24px; font-weight: bold;">2019</td> </tr> </table>			Month	Day	Year		Month	Day	Year	03	/ 26	2019	THROUGH	04	/ 26	2019					
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11 ELECTION	<table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="text-align: center; font-size: 8px;">ELECTION DATE</td> <td colspan="3" style="text-align: center; font-size: 8px;">ELECTION TYPE</td> </tr> <tr> <td style="width:15%; font-size: 8px;">Month</td> <td style="width:15%; font-size: 8px;">Day</td> <td style="width:15%; font-size: 8px;">Year</td> <td style="width:15%;"><input type="checkbox"/> Primary</td> <td style="width:15%;"><input type="checkbox"/> Runoff</td> <td style="width:15%;"><input type="checkbox"/> Other Description</td> </tr> <tr> <td style="text-align: center; font-size: 24px; font-weight: bold;">05</td> <td style="text-align: center; font-size: 24px; font-weight: bold;">/ 04</td> <td style="text-align: center; font-size: 24px; font-weight: bold;">/ 2019</td> <td><input checked="" type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>	ELECTION DATE			ELECTION TYPE			Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	05	/ 04	/ 2019	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special				
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05	/ 04	/ 2019	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special																		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) <div style="text-align: center; font-size: 18px; font-weight: bold;">Frisco ISD Board of Trustees - Place 2</div>																				

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME **Natalie Hebert** 15 Filer ID (Ethics Commission Filers)

16 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
<input type="checkbox"/> GENERAL	NONE
<input type="checkbox"/> SPECIFIC	
COMMITTEE ADDRESS	
COMMITTEE CAMPAIGN TREASURER NAME	
COMMITTEE CAMPAIGN TREASURER ADDRESS	

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,825
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 6,760.63
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,000

18 AFFIDAVIT

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.

Natalie Hebert

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said NATALIE HEBERT, this the 26TH day of APRIL, 20 19, to certify which, witness my hand and seal of office.

Michele L. Crutcher

Signature of officer administering oath

MICHELE L. CRUTCHER

Printed name of officer administering oath

NOTARY

Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME Natalie Hebert		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,275
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 550
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 5,000
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 6,760.93
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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **1 of 1**

2 FILER NAME

Natalie Hebert

3 Filer ID (Ethics Commission Filers)

4 Date

3/31/19

5 Full name of contributor

Julie Mcgraw

out-of-state PAC (ID#: _____)

6 Contributor address;

7144 Saint Phils

City; State; Zip Code

Frisco

TX

75035

7 Amount of contribution (\$)

\$75

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/02/19

Full name of contributor

Clark Miller

out-of-state PAC (ID#: _____)

Contributor address;

2908 Bellerive Drive

City; State; Zip Code

Plano

TX

75025

Amount of contribution (\$)

\$50

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/07/19

Full name of contributor

Gwendolyn Wittenbrook

out-of-state PAC (ID#: _____)

Contributor address;

8708 Bluffcreek Lane

City; State; Zip Code

Plano

TX

75024

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/11/19

Full name of contributor

Deb Pyne

out-of-state PAC (ID#: _____)

Contributor address;

9900 concord dr

City; State; Zip Code

Frisco

TX

75035

Amount of contribution (\$)

\$100

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.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: 1 of 1	2 FILER NAME Natalie Hebert	3 Filer ID (Ethics Commission Filers)
4 Date 4/22/19	5 Payee name NextDay Flyers	
6 Amount (\$) \$126.95	7 Payee address; City; State; Zip Code 435 N. Midland Ave. Saddle Brook, NJ 07663	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Natalie Hebert	Office sought FISD Board of Trustees, Place 2
Date 3/28/19	Payee name My M&M's	
Amount (\$) \$214.75	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	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 Natalie Hebert	Office sought FISD Board of Trustees, Place 2
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