

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: 10 |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR | FIRST | MI |
| | Ms. | Angela | D |
| | NICKNAME | LAST | SUFFIX |
| | | Dunford | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small> | ADDRESS / PO BOX; | APT / SUITE #; | CITY; STATE; ZIP CODE |
| | 10203 Asheboro St. | | Frisco TX 75035 |
| 5 CANDIDATE / OFFICEHOLDER PHONE | AREA CODE | PHONE NUMBER | EXTENSION |
| | (469) | 389-0015 | |
| 6 CAMPAIGN TREASURER NAME | MS / MRS / MR | FIRST | MI |
| | Ms. | Angela | |
| | NICKNAME | LAST | SUFFIX |
| | | Dunford | |
| 7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small> | STREET ADDRESS (NO PO BOX PLEASE); | APT / SUITE #; | CITY; STATE; ZIP CODE |
| | 10203 Asheboro St. | | Frisco TX 75035 |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION |
| | (469) | 389-0015 | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Runoff |
| | <input type="checkbox"/> July 15 | <input checked="" type="checkbox"/> 8th day before election | <input type="checkbox"/> Exceeded Modified Reporting Limit |
| | | | <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) |
| | | | <input type="checkbox"/> Final Report (Attach C/OH - FR) |
| 10 PERIOD COVERED | Month | Day | Year |
| | 3 | 29 | 22 |
| | THROUGH | Month | Day |
| | | 4 | 27 |
| | | Year | |
| | | | 22 |
| 11 ELECTION | ELECTION DATE | | ELECTION TYPE |
| | Month | Day | Year |
| | 5 | 7 | 22 |
| | | | Primary |
| | | | Runoff |
| | | | Other Description |
| | | | ■ General |
| | | | Special |
| 12 OFFICE | OFFICE HELD (if any) | | 13 OFFICE SOUGHT (if known) |
| | | | Frisco ISD Board of Trustees, Place 1 |
| 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 | | 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) | \$ 10.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 1,581.65 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. | \$ 77.19 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 1,440.28 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | \$ 1,409.17 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 2,000.00 |

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.

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

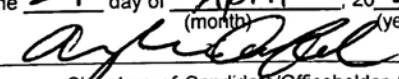
NOTARY STAMP / SEAL

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 Angela Dunford, and my date of birth is 5/7/82
 My address is 10203 Asheboro St., Frisco, TX, 75035, USA
(street) (city) (state) (zip code) (country)
 Executed in Collin County, State of Texas, on the 29th day of April, 2022.
(month) (year)

 Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

| | | |
|---|---|--|
| 19 FILER NAME Angela Dunford | | 20 Filer ID (Ethics Commission Filers) |
| 21 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 1,581.65 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input checked="" type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ 1,440.25 |
| 6. | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | \$ |
| 10. | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

| | | |
|---|--|---------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 3 |
| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: _____) Angelica Wilson | 7 Amount of contribution (\$) |
| 03/29/2022 | 6 Contributor address; City; State; Zip Code 9705 Honeysuckle Drive Frisco, TX 75035 | 30.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date | Full name of contributor out-of-state PAC (ID#: _____) Christina Sookdeo | Amount of contribution (\$) |
| 03/29/2022 | Contributor address; City; State; Zip Code 4687 Fallmeadow Drive Frisco, TX 75034 | 250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date | Full name of contributor out-of-state PAC (ID#: _____) Rohit Khanna | Amount of contribution (\$) |
| 03/30/2022 | Contributor address; City; State; Zip Code 10957 Cortez Court Frisco, TX 75033 | 16.65 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date | Full name of contributor out-of-state PAC (ID#: _____) Jeff Gray | Amount of contribution (\$) |
| 03/30/2022 | Contributor address; City; State; Zip Code 6579 Mountain Sky Rd. Frisco, TX 75036 | 100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements. | | |

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**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: **3****2** FILER NAME**3** Filer ID (Ethics Commission Filers)**4** Date**5** Full name of contributor

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

7 Amount of contribution (\$)

04/01/2022

Heidi Stone

500.00**6** Contributor address;

City;

State;

Zip Code

15443 Forest Haven Ln Frisco, TX 75035

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

Full name of contributor

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

Amount of contribution (\$)

04/05/2022

Janelle Willis

300.00

Contributor address;

City;

State;

Zip Code

11177 Powder Horn Lane Frisco, TX 75033

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

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

Amount of contribution (\$)

04/06/2022

Doreen Nesor

50.00

Contributor address;

City;

State;

Zip Code

14735 Ireland Lane Frisco, TX 75035

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

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

Amount of contribution (\$)

04/10/2022

Melanie Royer

100.00

Contributor address;

City;

State;

Zip Code

5159 Stillwater Trail Frisco, TX 75034

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: 3 |
| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 04/11/2022 | 5 Full name of contributor Meredith McGraw out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 1266 Sunland Park Drive Frisco, TX 75033 | 7 Amount of contribution (\$) 50.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 04/12/2022 | Full name of contributor Meghan Hahn out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 2342 April Sound Lane Frisco, TX 75033 | Amount of contribution (\$) 50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 04/20/2022 | Full name of contributor Lisa Taylor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 8426 SHADY SHORE Dr Frisco, TX 75036 | Amount of contribution (\$) 100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 04/25/2022 | Full name of contributor Carl Flowers out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 14713 Riverside Drive Little Elm, TX 75068 | Amount of contribution (\$) 25.00 |
| 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. | | |

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: 4 | 2 FILER NAME Angela Dunford | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 04/21/2022 | 5 Payee name Facebook | |
| 6 Amount (\$) 10.00 | 7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description Facebook Ads |
| | (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 04/22/2022 | Payee name Facebook | |
| Amount (\$) 50.00 | Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description Facebook Ads |
| | 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 04/22/2022 | Payee name UPrinting | |
| Amount (\$) 408.47 | Payee address; City; State; Zip Code 5200 30th St. SW Davenport, IA 52802 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | Description Push cards |
| | 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 | 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 | | | |

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| | | |
|---|---|--|
| 1 Total pages Schedule F1: | 2 FILER NAME Angela Dunford | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 04/21/2022 | 5 Payee name Facebook | |
| 6 Amount (\$) 10.00 | 7 Payee address; 1 Hacker Way | City; State; Zip Code Menlo Park, CA 94025 |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description Facebook Ads |
| | (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 04/22/2022 | Payee name Facebook | |
| Amount (\$) 50.00 | Payee address; 1 Hacker Way | City; State; Zip Code Menlo Park, CA 94025 |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description Facebook Ads |
| | 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 04/22/2022 | Payee name UPrinting | |
| Amount (\$) 408.47 | Payee address; 8000 Haskell Ave | City; State; Zip Code Van Nuys, CA 91406 |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | Description Push cards |
| | 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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
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| 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: | 2 FILER NAME Angela Dunford | 3 Filer ID (Ethics Commission Filers) |
|-----------------------------------|---------------------------------------|--|

| | |
|-----------------------------|---------------------------------|
| 4 Date 04/23/2022 | 5 Payee name Facebook |
|-----------------------------|---------------------------------|

| | | | | |
|-------------------------------|---|----------------------|--------------|-------------------|
| 6 Amount (\$) 60.00 | 7 Payee address; 1 Hacker Way | City; Menlo Park, | State; CA | Zip Code 94025 |
|-------------------------------|---|----------------------|--------------|-------------------|

| | | |
|---|--|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description Facebook Ads |
| | (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 04/24/2022 | Payee name Facebook |
|--------------------|------------------------|

| | | | | |
|----------------------|--------------------------------|----------------------|--------------|-------------------|
| Amount (\$) 50.00 | Payee address; 1 Hacker Way | City; Menlo Park, | State; CA | Zip Code 94025 |
|----------------------|--------------------------------|----------------------|--------------|-------------------|

| | | |
|-------------------------------|---|-----------------------------|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description Facebook Ads |
| | 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 04/26/2022 | Payee name Facebook |
|--------------------|------------------------|

| | | | | |
|----------------------|--------------------------------|----------------------|--------------|-------------------|
| Amount (\$) 75.00 | Payee address; 1 Hacker Way | City; Menlo Park, | State; CA | Zip Code 94025 |
|----------------------|--------------------------------|----------------------|--------------|-------------------|

| | | |
|-------------------------------|---|-----------------------------|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description Facebook Ads |
| | 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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| | | | |
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| 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 | | | |

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| | | |
|---|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME Angela Dunford | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 04/27/2022 | 5 Payee name Facebook | |
| 6 Amount (\$) 75.00 | 7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description Facebook Ads |
| | (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 | 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 |
| 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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