

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 Filer
N/A local

2 Total pages filed

3 CANDIDATE / OFFICEHOLDER NAME MR / MRS / MS / MISS Mrs FIRST NAME Kelly LAST NAME Karthik	CITY L STATE TX	OFFICE USE ONLY Date Received <h2 style="text-align: center;">APR 29 2022</h2> Date Report Delivered or Date Registered Receipt # Amount \$ Date Mailed Date Mailed
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS (Change of Address)	ADDRESS (STREET) 909 Touchstone Rd. Frisco, TX 75036 APT. / SUITE # CITY STATE ZIP CODE	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (217) NUMBER OF AREA 721-4932 EXTENSION	
6 CAMPAIGN TREASURER NAME	MR / MRS / MS / MISS Mr FIRST NAME Vijay LAST NAME Karthik	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (STREET) 909 Touchstone Rd. Frisco, TX 75036 APT. / SUITE # CITY STATE ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE (217) NUMBER OF AREA 721-4832 EXTENSION	
9 REPORT TYPE	<input type="checkbox"/> Voluntary <input checked="" type="checkbox"/> Mandatory <input type="checkbox"/> Request <input type="checkbox"/> Expired Modified Reporting Limit <input type="checkbox"/> 15-day after campaign treasurer appointment / officeholder filing <input type="checkbox"/> First Report (Attach C/OH 1B)	
10 PERIOD COVERED	FROM: Month 03 Day 29 Year 22 TO: Month 04 Day 29 Year 22	
11 ELECTION	ELECTION DATE: Month 05 Day 07 Year 22 ELECTION TYPE: General / Special / Other	
12 OFFICE	OFFICE NAME / TITLE 13 OFFICE SOURCE / TYPE Fisd Board of Trustees PI - 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.	

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**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME
Kelly Karthik

16 Filer ID (Ethics Commission Filers)
N/A Local

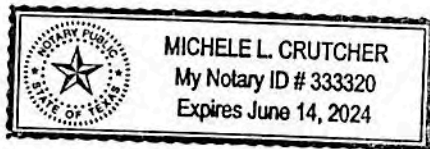
17 CONTRIBUTION TOTALS	1	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	4653.22
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	4653.22
EXPENDITURE TOTALS	3	TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$	8903.65
	4	TOTAL POLITICAL EXPENDITURES	\$	8903.65
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$	3334.39
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	8000

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.

Kelly Karthik
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by KELLY KARTHIK this the 29TH day of APRIL

20 *Michele L. Crutcher* to certify and witness my hand and seal of office. MICHELE L. CRUTCHER NOTARY
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____ and my date of birth is _____
My address is _____
(street) (city) (state) (zip code) (country)
Executed in _____ County, State of _____ on the _____ day of _____ 20____
(month) (year)
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Kelly Karthik		20 Filer ID (Ethics Commission Filers) N/A Local
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1	<input checked="" type="checkbox"/> SCHEDULE A1 MONETARY POLITICAL CONTRIBUTIONS	\$ 4653.22
2	SCHEDULE A2 NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3	SCHEDULE B PLEDGED CONTRIBUTIONS	\$
4	<input checked="" type="checkbox"/> SCHEDULE E LOANS	\$ 8000
5	<input checked="" type="checkbox"/> SCHEDULE F1 POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 8903.65
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 **4**

2 FILER NAME
Kelly Karthik

3 Filer ID (Ethics Commission Filer)
N/A Local

4 Date
04/04/2022

5 Full name of contributor
Kym Bryant
6 Contributor address
10269 El Cinco Dr, Frisco TX 75033

7 Amount of contribution (\$) **800**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/09/2022

Full name of contributor
Alex Cornwallis
Contributor address
1901 Sweet water Ln, Prosper, TX 75078

Amount of contribution (\$) **250**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/10/2022

Full name of contributor
William Meeker
Contributor address
10813 Merlo Ct, Frisco, TX 75035

Amount of contribution (\$) **100**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/11/2022

Full name of contributor
Dee Hucal
Contributor address
812 Compton Ave, Champaign, IL 61822

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.

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 **4**

2 FILER NAME

Kelly Karthik

3 Filer ID (Ethics Commission Filer)

Local

4 Date

5 Full name of contributor

City, State, ZIP Code

7 Amount of contribution (\$) **10**

04/12/2022

Brooke Rodriguez

6 Contributor address, City, State, Zip Code

9861 Old field Dr, Mckinney, TX 75072

8 Principal occupation - Job title (See instructions)

9 Employer (See instructions)

Date

Full name of contributor

City, State, ZIP Code

Amount of contribution (\$) **10**

04/18/2022

Rachel Frey

Contributor address, City, State, Zip Code

14993 Brazoria Dr, Frisco, TX 75033

Principal occupation - Job title (See instructions)

Employer (See instructions)

Date

Full name of contributor

City, State, ZIP Code

Amount of contribution (\$) **101**

04/23/2022

Vinay Kudithipudi

Contributor address, City, State, Zip Code

1813 Johnson Pl, Flower mound, TX 75028

Principal occupation - Job title (See instructions)

Employer (See instructions)

Date

Full name of contributor

City, State, ZIP Code

Amount of contribution (\$) **10**

04/23/2022

Dheeraj Golla

Contributor address, City, State, Zip Code

5716 Conch Train Rd, Mckinney, TX 75070

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 4

2 FILER NAME

Kelly Karthik

3 Filer ID (Ethics Commission Filer)

Local

4 Date

04/23/2022

5 Full name of contributor

Nagesh Kunamneni

7 Amount of contribution (\$)

250

6 Contributor address

2113 Woodview Dr, Flower mound, TX 75028

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/24/2022

Full name of contributor

Michele Ingalls

Amount of contribution (\$)

22.22

Contributor address

9414 Shirland Ln, Frisco, TX 75035

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/24/2022

Full name of contributor

Chithrai Mani

Amount of contribution (\$)

1000

Contributor address

4005 Don Dr, Flower mound, TX 75022

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/26/2022

Full name of contributor

Sundeep Jujala

Amount of contribution (\$)

500

Contributor address

8101 Southerland Ln, Plano, TX 75025

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

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

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1 Total pages Schedule A1 4

2 FILER NAME

Kelly Karthik

3 Filer ID (Ethics Commission Filer)

Local

4 Date

04/26/2022

5 Full name of contributor

Mounish Karlapudi

7 Amount of contribution (\$) 1000

6 Contributor address

784 Briarwood St, Morgantown, WV 26505

1000

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

Date

04/28/2022

Full name of contributor

Sivaraman Subramaniam

Amount of contribution (\$) 500

Contributor address

4704 Towne Square Dr, Plano, TX 75024

500

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

Full name of contributor

Amount of contribution (\$) 500

Contributor address

City, State, Zip Code

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

Full name of contributor

Amount of contribution (\$) 500

Contributor address

City, State, Zip Code

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

LOANS

SCHEDULE E

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E

2

2 FILER NAME
Kelly Karthik

3 Filer ID (Ethics Commission Filer)
NA Local

4 TOTAL OF UNITEMIZED LOANS

\$ 5000

5 Date of loan
04/06/2022

7 Name of lender out-of-state PAC
Vijay Karthik

9 Loan Amount (\$)
2000

6 Is lender a financial institution?
 Y N

8 Lender address City State Zip Code
909 Touchstone Rd, Frisco TX 75036

10 Interest rate

11 Maturity date

12 Principal occupation (Job title - See instructions)

13 Employer (See Instructions)
N/A

14 Description of Collateral

• none

15 Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address City State Zip Code

• not applicable

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan
04/15/2022

Name of lender out-of-state PAC
Vijay Karthik

Loan Amount (\$)
3000

Is lender a financial institution?
 Y N

Lender address City State Zip Code
909 Touchstone Rd, Frisco, TX 75036

Interest rate

Maturity date

Principal occupation (Job title - See instructions)

Employer (See Instructions)
N/A

Description of Collateral

none

Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address City State Zip Code

• not applicable

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule E

2

3 Filer ID (Ethics Commission Filers)

Local

2 FILER NAME

Kelly Karthik

4 TOTAL OF UNITEMIZED LOANS

9 Loan Amount (\$)

3000

10 Interest rate

11 Maturity date

5 Date of loan

04/20/2022

7 Name of lender

Vijay Karthik

out of state PAC: (X)

6 Is lender a financial institution?

Y N

8 Lender address

909 Touchstone Rd, Frisco, TX 75036

City:

State:

Zip Code:

12 Principal occupation / Job title (See instructions)

13 Employer (See instructions)

N/A

14 Description of Collateral

none

15

Check if personal funds were deposited into political account (See instructions)

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address

City:

State:

Zip Code:

not applicable

20 Principal Occupation (See instructions)

21 Employer (See instructions)

Date of loan

Name of lender

out of state PAC: (X)

Loan Amount (\$)

Is lender a financial institution?

Y N

Lender address

City:

State:

Zip Code:

Interest rate

Maturity date

Principal occupation / Job title (See instructions)

Employer (See instructions)

Description of Collateral

none

Check if personal funds were deposited into political account (See instructions)

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address

City:

State:

Zip Code:

not applicable

Principal Occupation (See instructions)

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

- Advertising Expense
- Accounting/Banking
- Consulting Expense
- Contributions/Donations Made By:
 - Candidate/Officeholder/Political Committee
 - Card/Card Payment
- Event Expense
- Fees
- Food/Beverage Expense
- Gift/Awards/Membership Expenses
- Legal Services
- Loan Repayment/Reimbursement
- Office Overhead/Rental 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 **5** 2 FILER NAME Kelly Karthik 3 Filer ID (Ethics Commission Filer) 100001

4 Date 04/07/2022 5 Payee name Venmo - Polaris Group
 6 Amount (\$) 250 7 Payee address, City, State, Zip Code
 7210 Virginia Pkwy Ste 100, PO BOX 6385, Mckinney, TX 75071

8 PURPOSE OF EXPENDITURE (a) Category Advertising Expense (b) Description Campaign Advertising

9 Complete ONLY if direct expenditure to benefit C/OH
 Date 04/08/2022 Payee name Printsoncheap
 Amount (\$) 1413.05 Payee address, City, State, Zip Code
 11525A Stonehollow Dr, Ste100, Austin TX 78758

PURPOSE OF EXPENDITURE (a) Category Printing (b) Description

Complete ONLY if direct expenditure to benefit C/OH
 Date 04/08/2022 Payee name The Pop Parlour
 Amount (\$) 281.83 Payee address, City, State, Zip Code
 2552 Stonebrook Pkwy Suite #A600, Frisco, TX 75034

PURPOSE OF EXPENDITURE (a) Category Food/Beverage Expense (b) Description

Complete ONLY if direct expenditure to benefit C/OH
 Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Direct Cash Payment

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

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

Stipend/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 **5** 2 FILER NAME Kelly Karthik 3 Filer ID (Ethics Commission Filer) **LOCA1**

4 Date 04/11/2022 5 Payee name Shimmy Giggles - Childrens Entertainment

6 Amount (\$) 226 7 Payee address, City, State, Zip Code
413 East Ash, Euless, TX 76039

8 (a) Category (see category listed at the top of this schedule) (b) Description
PURPOSE OF EXPENDITURE Event Expense

9 Complete ONLY if direct expenditure to benefit C/OH
(c) (see if you are outside of Texas, complete Schedule F)
Candidate / Officeholder name Office sought Office held
Date Payee name
04/11/2022 The Pop Parlour

Amount (\$) 180.62
Payee address, City, State, Zip Code
2552 Stonebrook Pkwy Suite #A600, Frisco, TX 75034

(a) Category (see category listed at the top of this schedule) (b) Description
PURPOSE OF EXPENDITURE Food/Beverage Expense

Complete ONLY if direct expenditure to benefit C/OH
(c) (see if you are outside of Texas, complete Schedule F)
Candidate / Officeholder name Office sought Office held
Date Payee name

04/12/2022 Minuteman Press Frisco
Amount (\$) 119.35
Payee address, City, State, Zip Code
8200 Stonebrook Pkwy, Ste 107, Frisco TX 75034

(a) Category (see category listed at the top of this schedule) (b) Description
PURPOSE OF EXPENDITURE Printing Expense

Complete ONLY if direct expenditure to benefit C/OH
(c) (see if you are outside of Texas, complete Schedule F)
Candidate / Officeholder name Office sought Office held
Date Payee name

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|---------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Filing Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officer/holder/Political Committee | Gift/Awards/Memorabilia 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: 5 2 FILER NAME: 3 Filer ID (Ethics Commission Filers): Local

4 Date: 04/12/2022 5 Payee name: Minuteman Press Frisco

6 Amount (\$): 119.35 7 Payee address: 8200 Stonebrook Pkwy, Ste 107, Frisco TX 75034 City, State, Zip Code

8 (a) Category (see Categories listed at the top of this schedule): Printing Expense (b) Description

PURPOSE OF EXPENDITURE

(c) Check if travel outside of Texas (complete Schedule F) Check if Austin, TX, officer/holder living expense

9 Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officer/holder name Office sought Office held

Date: 04/16/2022 Payee name: Cooper's Copies & Printing

Amount (\$): 2206.14 Payee address: 1024 Dallas Dr, Denton, TX 76205 City, State, Zip Code

PURPOSE OF EXPENDITURE

Category (see Categories listed at the top of this schedule): Printing Expense Description

(c) Check if travel outside of Texas (complete Schedule F) Check if Austin, TX, officer/holder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officer/holder name Office sought Office held

Date: 04/18/2022 Payee name: MAILCHIMP ATLANTA GA

Amount (\$): 56.60 Payee address: 675 Ponce de Leon Ave NE, Suite 5000, Atlanta, GA 30308 USA City, State, Zip Code

PURPOSE OF EXPENDITURE

Category (see Categories listed at the top of this schedule): Solicitation Expense Description

(c) Check if travel outside of Texas (complete Schedule F) Check if Austin, TX, officer/holder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officer/holder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Merchandise 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: **5** 2 FILER NAME: **Kelly Karthik** 3 Filer ID (Ethics Commission Filers): **LOCAL**

4 Date: **04/18/2022** 5 Payee name: **USPS**

6 Amount (\$): **2000** 7 Payee address: **8700 Stonebrook Pkwy, Frisco, TX 75034** City: State: Zip Code:

8 PURPOSE OF EXPENDITURE: **Solicitation Expense**

(a) Category (See Categories listed at the top of this schedule): (b) Description:

(c) Check if travel outside of Texas (Complete Schedule F) Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name: Office sought: Office held:

Date: **04/20/2022** Payee name: **USPS**

Amount (\$): **200** Payee address: **8700 Stonebrook Pkwy, Frisco, TX 75034** City: State: Zip Code:

PURPOSE OF EXPENDITURE: **Solicitation Expense**

(a) Category (See Categories listed at the top of this schedule): (b) Description:

(c) Check if travel outside of Texas (Complete Schedule F) Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name: Office sought: Office held:

Date: **04/23/2022** Payee name: **Big Frog of Frisco**

Amount (\$): **306.69** Payee address: **4280 Main St STE 450, Frisco, TX 75034** City: State: Zip Code:

PURPOSE OF EXPENDITURE: **Printing Expense**

(a) Category (See Categories listed at the top of this schedule): (b) Description:

(c) Check if travel outside of Texas (Complete Schedule F) Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name: Office sought: Office held:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorabilia 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 **5** 2 FILER NAME 3 Filer ID (Ethics Commission Filers) **Local**

4 Date **04/23/2022** 5 Payee name **USPS**
6 Amount (\$) **48** 7 Payee address, City, State, Zip Code
8700 Stonebrook Pkwy, Frisco, TX 75034

8 (a) Category (See Categories listed at the top of this schedule) **Solicitation Expense** (b) Description
PURPOSE OF EXPENDITURE
(c) Check if expenditure outside of Texas. Complete Schedule F Check if Austin, TX, officeholder filing expense

9 Complete ONLY if direct expenditure to benefit C/OH
Candidate / Officeholder name Office sought Office held

Date **04/25/2022** Payee name **Minuteman Press Frisco**
Amount (\$) **946.02** Payee address, City, State, Zip Code
8200 Stonebrook Pkwy, Ste 107, Frisco TX 75034

PURPOSE OF EXPENDITURE **Printing Expense** Description
 Check if expenditure outside of Texas. Complete Schedule F Check if Austin, TX, officeholder filing expense

Complete ONLY if direct expenditure to benefit C/OH
Candidate / Officeholder name Office sought Office held

Date **04/26/2022** Payee name **Venmo - Polaris Group**
Amount (\$) **550** Payee address, City, State, Zip Code
7210 Virginia Pkwy Ste 100, PO BOX 6385, Mckinney, TX 75071

PURPOSE OF EXPENDITURE **Advertising Expense** Description
 Check if expenditure outside of Texas. Complete Schedule F Check if Austin, TX, officeholder filing expense

Complete ONLY if direct expenditure to benefit C/OH
Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED