

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: 11				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Everett	MI A	OFFICE USE ONLY			
	NICKNAME	LAST Roy	SUFFIX		Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	Date Filed <u>12/02/22</u> Rebecca Huerta City Secretary	
	14626 Red River Drive		Corpus Christi TX	78410			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Reported (if different from filing date) <input type="checkbox"/> Marked			
	(361)	443-9173					
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$	Date Processed	
	NICKNAME	LAST	SUFFIX				Date Imaged
		Robin					
		Ritchey-Roy					
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	14626 Red River Drive		Corpus Christi TX	78410			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(724)	816-7386					
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)						
10 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	10	31	2022		12	13	2022
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	
	12	13	2022	<input type="checkbox"/> General	<input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)			
				Council Member, District 1			
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	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						

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)	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>17,300.00</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>14,256.46</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>5652.60</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0</u>

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.



Everett Roy
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Everett Roy this the 2 day of December, 2022, to certify which, witness my hand and seal of office.

Everett Roy Printed name of officer administering oath
Signature of officer administering oath Signature of officer administering oath
Notary public 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		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 17,300.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 14,256.46
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

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: <i>1 of 6</i>
2 FILER NAME <i>Everett Roy</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>11/2/22</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Dhiren Bhakta</i>	7 Amount of contribution (\$) <i>\$50000</i>
6 Contributor address; City; State; Zip Code <i>3838 US Highway 77 Corpus Christi, TX 78410</i>		
8 Principal occupation / Job title (See Instructions) <i>hotel operator</i>		9 Employer (See Instructions)
Date <i>11/2/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>MAC Enterprises</i>	Amount of contribution (\$) <i>\$30000</i>
Contributor address; City; State; Zip Code <i>Po Box 271127 Corpus Christi, TX 78427</i>		
Principal occupation / Job title (See Instructions) <i>SELF-Employed, Developer</i>		Employer (See Instructions)
Date <i>11/11/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ernest Garza</i>	Amount of contribution (\$) <i>\$100000</i>
Contributor address; City; State; Zip Code <i>10201 Leopard St Corpus Christi, TX 78410</i>		
Principal occupation / Job title (See Instructions) <i>Accounting Firm</i>		Employer (See Instructions)
Date <i>11/14/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>William Goldston</i>	Amount of contribution (\$) <i>10000</i>
Contributor address; City; State; Zip Code <i>13721 Tajamar Corpus Christi, TX 78418</i>		
Principal occupation / Job title (See Instructions) <i>Engineer</i>		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

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: 2 of 6
2 FILER NAME Everett Roy		3 Filer ID (Ethics Commission Filers)
4 Date 11/14/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AI Jones	7 Amount of contribution (\$) \$500⁰⁰
6 Contributor address; City; State; Zip Code 3420 Ocean Drive Corpus Christi TX 78411		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/15/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CC File Pro	Amount of contribution (\$) \$250⁰⁰
Contributor address; City; State; Zip Code 2106 Lipan street Corpus Christi TX 78408		
Principal occupation / Job title (See Instructions) Self employed owner		Employer (See Instructions)
Date 11/15/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) International LTD	Amount of contribution (\$) \$1500⁰⁰
Contributor address; City; State; Zip Code Po Box 4956, Corpus Christi TX 78469		
Principal occupation / Job title (See Instructions) Property management		Employer (See Instructions)
Date 11/15/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauree Mintz, Michael Mintz	Amount of contribution (\$) \$1000⁰⁰
Contributor address; City; State; Zip Code 3344 Ocean Drive Corpus Christi TX 78411		
Principal occupation / Job title (See Instructions) Doctor		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: 3 of 6
2 FILER NAME Everett Ray		3 Filer ID (Ethics Commission Filers)
4 Date 11/15/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddie Martinez Agency	7 Amount of contribution (\$) \$ 150⁰⁰
6 Contributor address; City; State; Zip Code 5262 S. Staples St, Corpus Christi TX		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/15/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grass Roots LLC	Amount of contribution (\$) \$ 3500⁰⁰
Contributor address; City; State; Zip Code 4855 S. Alameda St Corpus Christi TX 78412		
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions)
Date 11/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Lovoi M.D PA	Amount of contribution (\$) \$ 500⁰⁰
Contributor address; City; State; Zip Code PO Box 61077 Corpus Christi TX 78466		
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions)
Date 11/17/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karen O'Connor Urban	Amount of contribution (\$) \$ 500⁰⁰
Contributor address; City; State; Zip Code 4110 Ocean Dr, Corpus Christi TX 78411		
Principal occupation / Job title (See Instructions) Retired		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.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 4 of 6
2 FILER NAME Everett Roy		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr + Mrs David Engel	7 Amount of contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code 230 Amistad, Corpus Christi TX 78404	
8 Principal occupation / Job title (See Instructions) attorney / realtor		9 Employer (See Instructions)
Date 11/16/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ken W. Griffin	Amount of contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 5443 Aikens Way, Corpus Christi TX 78380	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/18/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony Lamenta	Amount of contribution (\$) \$750.00
	Contributor address; City; State; Zip Code 4136 Ocean Drive, Corpus Christi TX 78411	
Principal occupation / Job title (See Instructions) Distributor		Employer (See Instructions)
Date 11/18/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lori Stone	Amount of contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 2238 Bird Island Dr Corpus Christi TX 78418	
Principal occupation / Job title (See Instructions) healthcare professional		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: <i>5 of 6</i>
2 FILER NAME <i>Everett Roy</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>11/21/22</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>William Kelly</i>	7 Amount of contribution (\$) <i>\$ 500.00</i>
6 Contributor address; City; State; Zip Code <i>1402 N. Chaparral Corpus Christi TX 78401</i>		
8 Principal occupation / Job title (See Instructions) <i>Attorney</i>		9 Employer (See Instructions)
Date <i>11/22/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Joe + Mary McComb</i>	Amount of contribution (\$) <i>\$ 250.00</i>
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions) <i>Self employed/Retired</i>		Employer (See Instructions)
Date <i>11/30/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>S. Royce Cameron</i>	Amount of contribution (\$) <i>\$1500.00</i>
Contributor address; City; State; Zip Code <i>6730 Leopard St Corpus Christi, TX 78409</i>		
Principal occupation / Job title (See Instructions) <i>property management</i>		Employer (See Instructions)
Date <i>11/26/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Standra Tennapel</i>	Amount of contribution (\$) <i>\$ 200.00</i>
Contributor address; City; State; Zip Code <i>8026 St Laurent Dr Corpus Christi, TX 78414</i>		
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions)

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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: <i>6 of 6</i>
2 FILER NAME <i>Everett Roy</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>11/30/22</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Trepac / Texas Association of Realtors</i>	7 Amount of contribution (\$) <i>\$2500.00</i>
6 Contributor address; City; State; Zip Code <i>PO Box 2246, Austin Texas 78768</i>		
8 Principal occupation / Job title (See Instructions) <i>Realtors</i>		9 Employer (See Instructions)
Date <i>11/30/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Christopher Minnich</i>	Amount of contribution (\$) <i>\$500.00</i>
Contributor address; City; State; Zip Code <i>3310 Oakwell Ct # 26203 San Antonio TX 78218</i>		
Principal occupation / Job title (See Instructions) <i>Designer</i>		Employer (See Instructions)
Date <i>11/30/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>David Ritchey</i>	Amount of contribution (\$) <i>\$50.00</i>
Contributor address; City; State; Zip Code <i>892 CR 75 Robstown TX 78380</i>		
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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Everett Roy Schedule F1

Expenses	Amount	Date	Category/Purpose	Address
Campaign Services LLC	\$ 1,000.00	11/11/2022	Mailer and Graphic Design	6814 Riverside Dr, Austin, TX 78741
Land and Sea	\$ 42.30	11/14/2022	Meeting with Contributor	9301 Leopard St. Corpus Christi, TX 78410
Inspiring Social	\$ 275.00	11/17/2022	Social Media	13842 Exchequer Dr., Corpus Christi, TX 78410
Gloria Benavides	\$ 1,200.00	11/11/2022	Advertising/Marketing,	10717 Leopard St, Corpus Christi, TX 78410
M. Ryan Design	\$ 290.00	11/13/2022	Website	340 Indiana Ave., Corpus Christi, TX 78404
Campaign Services LLC	\$ 750.00	11/18/2022	Phone Banking	6814 Riverside Dr, Austin, TX 78741
Facebook META	\$ 212.13	10/15/2022	Advertising	1 Hacker Way, Menlo, CA, 94025
Campaign Services LLC	\$ \$4,900.00	11/21/2022	Design, Mailer, Postage	6814 Riverside Dr, Austin, TX 78741
Northwest Event Center	\$ 1,200.00	11/24/2022	Event Annaville	9840 Leopard St, Corpus Christi, TX 78410
Sticker Store	\$ 465.48	11/22/2022	Runoff signs	11401 Leopard St. Corpus Christi, TX 78410
Cooper Outdoor Advertising	\$ 1,200.00	11/22/2022	Advertising	115 Waco St, Corpus Christi, TX 78401
Beaded of CC	\$ 349.65	11/23/2022	Signs	1390 I-37, Corpus Christi, TX 78409
Tractor Supply	\$ 74.59	11/23/2022	sign post	2917 Hwy 77, I-69 , Corprus Christi, TX 78410
Inspiring Social	\$ 250.00	12/2/2022	Social Media	13842 Exchequer Dr., Corpus Christi, TX 78410
Campaign Services LLC	\$ 1,125.00	12/2/2022	Phone Banking,design artwork	6814 Riverside Dr, Austin, TX 78741
Anedot	\$ 60.10	12/2/2022	Service fee	5555 Hilton Ave, Baton Rouge, LA 70808
Grunwald Printing	\$ 862.21	12/2/2022	Printing	1418 Morgan Ave, Corpus Christi, 78404
TOTAL	\$ 14,256.46			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>See Attached</i>	2 FILER NAME <i>Everett Roy</i>	3 Filer ID (Ethics Commission Filers)
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4 Date	5 Payee name
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6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

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