[redacted]

CAMPA GN F ANCE REPORT

4/1/2021

COVER SHEET PG 1

1 Filer ID (Ethics Commission Filers) 2 Total pages filed:

[redacted]

1 2021

D

021

02

[redacted]

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR

A hue

FIRST

LAST

M

SUFFIX

7

OFFICE USE ONLY

Date Received

4 CANDIDATE / ADDRESS / PO BOX APT / SUITE #

[redacted]

SUBTOTALS - C/O

FORM C/OH
COVER SHEET PG 3

Brookins

20 Filer ID (Ethics Commission Filers)

	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1	[Y] SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ [redacted]
2	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3	SCHEDULE B: PLEDGED CONTRIBUTIONS	$
8	SCHEDULE E: LOANS	$
	[X] SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 3688.40
	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
7	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$
	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	[redacted]
11	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	
12	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$

ONETARY POL T CAL CONTRIBUT ONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor ☐ out-of-state PAC

7 Amount of contribution ($)

$ 500

State; Zip Code

TX 76110

[redacted]

☐ out-of-state PAC

Government Fund

Contributor address; City; State; Zip Code

Date

Full name of contributor

Amount of contribution ($)

3/1/202

LINEBARGER &

☐ out-of-state PAC (ID#:_____)

Contributor address; City;

$ 2000

100 Throckmorton FTW TX 76102

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Full name of contributor

Amount of contribution ($)

$ 500

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contri

Amount of contribution ($)

PSEL

Contributor address; C ty; State; Zip Code

$ 500

201 Main St FTW TX 76102

[redacted]

1 Total pages Schedule A1

2 FILER NAME
Daphne Bell

3 Filer ID (Ethics Commission Filers)

5 Full name of contributor

7 Amount of contribution ($)

Date United Educators CA E $2000

6 Contributor address; City; State; Zip Code

1 3612 W. 6th St. FW TX 76107

[redacted]

☐ out-of-state PAC

Preston (Pete) Geren & Bekie Geren

Contributor address; City; State; Zip Code

[redacted]

POL T CAL EXPEND TURES MADE FROM POLITICAL CONTRIBUT ONS

SCHEDULE F1

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
e
Expense
Po
Pri
Sa
ontract 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

3 Filer ID (Ethics Commission Filers)

4

5

6 ($) 4104.86

7 Payee Healen

City; Rd. Ftw State; TX Zip Code

8 PURPOSE OF EXPENDITURE

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

(b) Description / to post

[redacted]

(c)

ect
t C/OH

Candidate / Officeholder name

Office sought

Payee name

[redacted]

Office held

State; Zip Code

Amount ($)

ss; East

Category (See Categories listed at the top of this schedule)

EXPENDITURE

POL T CAL EXPEND TURES MADE FROM POLITICAL CONTR BUT ONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees
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Expense
Po
Pri
Sa
urse
Exp
ntract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District

[redacted]

The Instruction Guide explains how to complete this form.

[redacted]

1 Total pages Schedule F1

4 5

6 ($) 7 City; State; Zip Code

$3,380.23 Austin TX 78701

Print

PURPOSE OF EXPENDITURE Consulting Expense

(c)

Candidate / Officeholder name Office sought Office held

[redacted]

Printing

Amount ($)

$100 835 East Loop 820 So. TX 76119

Description

150 Push Cards

PURPOSE OF EXPENDITURE

Office held

(a) Category (See Categories listed at the top of this schedule) Candidate / Officeholder name (b) Description

Mailer

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

Check if Austin, TX, officeholder living expense

9 Amount ($) if direct enefit C/OH

Zip Code

Description

PURPOSE