

FORM C/OH
SHEET PG 1

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ICE USE ONLY

12/1/2022

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Report (Attach C/OH - FR)

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SCHEDULE A2

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In-kind contribution
description

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SCHEDULE F1

Amount
Expense
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Amount

Filer ID (Ethics Commission Filers)

EC

State; Zip Code

TX 76164

Amount

EC

If Austin, TX, officeholder living expense

Amount

Office held

State; Zip Code

TX 76107

Amount

EC

If Austin, TX, officeholder living expense

Amount

Office held

EC

State; Zip Code

TX 76110

Amount

EC

If Austin, TX, officeholder living expense

Amount

Office held

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SCHEDULE F1

FOR BOX 8(a)

Expense
Equipment & Related Expense
In District
Out Of District
(enter a category not listed above)

complete this form.

Filer ID (Ethics Commission Filers)

r e

City;

State;

Zip Code

Ft Worth TX 76107

(b) Description

Campaign
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☐ Check if Austin,

officeholder living expense

Office sought

Office held

255

City;

State;

Zip Code

WY Ft Worth TX 76110

Description

signs,
push cars

☐ Check If Austin,

officeholder living expense

Office sought

Office held

5

City;

State;

Zip Code

Ft Worth TX 76109

Description

☐ Check if Austin,

officeholder living expense

Office sought

Office held

HIS SCHEDULE AS

s.tx.us

Revised 1/1/2020

SCHEDULE F1

8(a)

Assessment
Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

† Labor

§ form.

§ Filer ID (Ethics Commission Filers)

182

City;

State;

Zip Code

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Description

Check if Austin, TX, officeholder living expense

Sought

Office held

Service

City;

State;

Zip Code

TX 76107

Description

Living

Check if Austin, TX, officeholder living expense

Sought

Office held

City;

State;

Zip Code

Description

Check if Austin, TX, officeholder living expense

Sought

Office held

PLEASE AS NEEDED