

CAND DATE / OFF CEHOLDER
CAMPA GN 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:

7 9

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

TRISCHELE

MI

A

OFFICE USE ONLY

NICKNAME

LAST

STRONG

SUFFIX

Date Received

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX:

APT / SUITE #:

CITY:

STATE:

ZIP CODE

4509 ROLLING HILLS DR. FW, TX 76119

4/29/2022

Date

ate Postmarked

9/2022

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

MS

FIRST

JENNIFER

MI

Receipt #

Amount \$

NICKNAME

LAST

CROSSLAND

SUFFIX

Date Processed

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #:

CITY:

STATE:

ZIP CODE

4417 TAMWORTH RD FW

TX 76116

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(310) 980 2430

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

TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR
CONTRIBUTIONS MADE ELECTRONICALLY)

\$ 3521.86

2

TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0

EXPENDITURE
TOTALS

3

TOTAL UNITEMIZED POLITICAL EXPENDITURE

\$ 529.80

4

TOTAL POLITICAL EXPENDITURES

\$ 5821

CONTRIBUTION

ch

n

other

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

ISCH

ON

21 SCHEDULE SUBTOTALS

SUBTOTAL
AMOUNT



SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS

2.



\$ 3521.8

3

SCHEDULE B: PLEDGED CONTRIBUTIONS

4

5.



\$ 5851

6

SCHEDULE E2: UNPAID INCURRED OBLIGATIONS

\$

7

SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

\$



SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD

\$ 529.80

9

SCHEDULE G1: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

\$



SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH



SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$

8

10

\$

11

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.

2 FILER NAME

TRISCHELLE STRONG

☐ out-of-state PAC

SEE ATT

3 Filer ID (Ethics Commission Filers)

4 Date

7 Amount of contribution (\$)

☐ out-of-state PAC

6 Contributor address;

City;

State; Zip Code

☐ out-of-state PAC

8 Principal occupation / Job title (See Instructions)

City;

9 Employer (See Instructions)

☐ name of contributor

☐ out-of-state PAC

Contributor address;

City;

State; Zip Code

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

DATE	\$\$\$	OCCUPATION	EMPLOYER
		2400 RETIRED	PTA
		20 CLOTHING CONSULTANT	SELF
		20 HOME BIZ INSURANCE	SELF
		40 RETIRED	
		100 RETIRED	
		200 SELF EMPLOYED	
		100 DIRECTOR OF OPS	ID TECHNOLOGY
		25 LAWYER	CAMPBELL LAW FIRM
		3500 RETIRED	PTA
		\$6405.00	

5

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: 1

2 FILER NAME

TRISCHEUE STRONG

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

3521.86

M K INE NOLAN

671 ONTEGO CT. FW

Date

7 Contributor address, City, State, Zip Code

3 1-86

31400

Check if travel outside of Texas Complete Schedule T.

10 Political organization Job title (FOR NON-JUDICIAL)(See Instructions)

11 Employer (FOR NON-JUDICIAL)(See Instructions)

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

DO NOT include this in the report

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

1 Total pages Schedule F1

3 Filer ID (Ethics Commission Filers)

4 Date

5 Payee name

6 Amount (\$)

7 Payee address;

City;

State;

Zip Code

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

(b) Description

EXPENDITURE CATEGORIES FOR BOX 8(a)

(c)

☐

Check if travel outside of Texas. Complete Schedule T.

☐

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

Payee name

The Instruction Guide explains how to complete this form.

2 FILER NAME

TRISCHELLE

ON

Amount (\$)

Payee address

City;

State

Zip Code

SEE ATTACHED

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

Description

8

PURPOSE OF EXPENDITURE

☐

Check if travel outside of Texas. Complete Schedule T.

☐

Check if Austin, TX, officeholder living expense

Office sought

Office held

PURPOSE OF EXPENDITURE

ATTACH NT F1

PAYEE NAME
ELIJAH'S WALK OF D
TEXAS DEM PARTY
GMAIL
TIAMBRIA GEARY
ELIJAH'S WALK OF D
METRO MAILER
MUHOLLAND
DIANA LEE
RICHARD MUDD

APRIL 29TH FILING

NT	PAYEE ADDRESS	CATEGORY	DESCRIPTION
98	1520 BURMEISTER RD FW,TX 76134	ADVERTISING EXPENSE	SLL CERTIFICATE
135	TXDEMOCRATS.ORG	SOLICITATION EXPENSE	VOTER LIST
25	GMAIL	OTHER	EMAIL
85	8509 DAVIS BLVD SUITE 110, NRH, TX 76182	OTHER	HAIR AND MAKEUP
100	1520 BURMEISTER RD FW,TX 76134	POLLING EXPENSE	VOTER LIST
140.50	5719 E. ROSEDALE ST. SUTE 809. FW, TX 76112	ADVERTISING EXPENSE	MAILERS
187.50	1200 W BERRY. FW,TX 76110	ADVERTISING EXPENSE	BIG SIGNS
1000	4009 CONLEY LN CROWLEY, TX 76036	POLLING EXPENSE	PHONE BANK
550	4000 SIGMA RD FARMERS BRANCH,TX 75244	CONTRACT LABOR	PHOTOGRAPHY

321.00

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

DO NOT include this page in the report

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total Schedule F4: 3 Filer ID (Ethics Commission Filers)

6 Payee name

7 Amount (\$) 8 Payee address; City; State Zip Code

9

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

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

11 Candidate / Officeholder name Office sought Office held

2 FILER NAME

ISCH S ON

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 529.

5 Date 4/28/

B of A

Date

Payee name

Amount (\$) 529.80

Payee address

City;

State;

Zip Code

TYPE OF EXPENDITURE



Political

Non-Political

10

Non-Political (b) Description

EXPENSE CAMPAIGN

Description