

Rec'd 1/25/20 @ 1:25pm  
Email

<b>CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT</b>				<b>FORM C/OH COVER SHEET PG 1</b>				
The C/OH Instruction Guide explains how to complete this form.			<b>1</b> Filer ID (Ethics Commission Filers)		<b>2</b> Total pages filed: <span style="font-size: 1.5em;">11</span>			
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI MRS. VANESSA				<b>OFFICE USE ONLY</b>  Date Received  <span style="font-size: 1.2em; color: blue;">1/25/20 @ 1:25pm</span>  Date Hand-delivered or Date Postmarked  Receipt # Amount \$ Date Processed Date Imaged			
	NICKNAME LAST SUFFIX PACHECO							
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address				ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE RICHARDSON, TX 75081				
5 CANDIDATE/ OFFICEHOLDER PHONE				AREA CODE PHONE NUMBER EXTENSION <div style="background-color: black; width: 150px; height: 1.2em; margin: 5px 0;"></div>				
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI MR. CURTIS							
	NICKNAME LAST SUFFIX WOODARD							
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)				STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE RICHARDSON, TX 75081				
8 CAMPAIGN TREASURER PHONE				AREA CODE PHONE NUMBER EXTENSION <div style="background-color: black; width: 150px; height: 1.2em; margin: 5px 0;"></div>				
<b>9</b> REPORT TYPE								
<div style="display: flex; flex-wrap: wrap;"><div style="width: 50%;"><input checked="" type="checkbox"/> January 15</div><div style="width: 50%;"><input type="checkbox"/> 30th day before election</div><div style="width: 50%;"><input type="checkbox"/> Runoff</div><div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div><div style="width: 50%;"><input type="checkbox"/> July 15</div><div style="width: 50%;"><input type="checkbox"/> 8th day before election</div><div style="width: 50%;"><input type="checkbox"/> Exceeded Modified Reporting Limit</div><div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div></div>								
<b>10</b> PERIOD COVERED								
Month Day Year Month Day Year 4 / 24 / 25 THROUGH 12 / 31 / 25								
<b>11</b> ELECTION								
ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special								
<b>12</b> OFFICE								
OFFICE HELD (if any) OFFICE SOUGHT (if known) Richardson ISD Trustee D2 Richardson ISD Trustee D2								
<b>14</b> 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.								
COMMITTEE TYPE COMMITTEE NAME								
<input type="checkbox"/> GENERAL COMMITTEE ADDRESS								
<input type="checkbox"/> SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME								
COMMITTEE CAMPAIGN TREASURER ADDRESS								
Additional Pages								

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

<b>15 C/OH NAME</b> VANESSA PACHECO		<b>16 Filer ID</b> (Ethics Commission Filers)
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 1993.31
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1993.31
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 1509.92
	4. TOTAL POLITICAL EXPENDITURES	\$ 1509.92
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 3384.95
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3000.00

**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.

*Vanessa Pacheco*

Signature of Candidate or Officeholder

Please complete either option below:

**(1) Affidavit**

NOTARY STAMP / SEAL

Sworn to and subscribed before me by \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is Vanessa Pacheco, and my date of birth is [REDACTED]

My address is [REDACTED], Richardson, TX, 75081

(street) (city) (state) (zip code) (country)

Executed in Dallas County, State of Texas, on the 25 day of January, 2026

(month) (year)

*Vanessa Pacheco*

Signature of Candidate/Officeholder (Declarant)

Rec'd 1/25/26 @ 1:25pm  
Email

## 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	\$ 1993.31
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 1509.92
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 3000.00
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: 5
2 FILER NAME VANESSA PACHECO		3 Filer ID (Ethics Commission Filers)
4 Date 04/29/2025	5 Full name of contributor out-of-state PAC (ID#: Carlson Sharpless 6 Contributor address; City; State; Zip Code Dallas, TX 75243	7 Amount of contribution (\$)  26.55
8 Principal occupation / Job title (See Instructions) IT Specialist		9 Employer (See Instructions) Texas Instruments
Date 4/30/2025	Full name of contributor out-of-state PAC (ID#: Emily Villamar-Robbins Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of contribution (\$)  52.59
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 4/30/2025	Full name of contributor out-of-state PAC (ID#: Whitney Hurwitz Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of contribution (\$)  78.63
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Akiba Yavneh Academy
Date 4/30/2025	Full name of contributor out-of-state PAC (ID#: Angela Keiser Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of contribution (\$)  25.00
Principal occupation / Job title (See Instructions) Training		Employer (See Instructions) City of Carrollton
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">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 FILER NAME VANESSA PACHECO		3 Filer ID (Ethics Commission Filers)
4 Date 4/30/2025	5 Full name of contributor Stephanie Loovis out-of-state PAC (ID#: 6 Contributor address; Richardson, TX 75081 City; State; Zip Code	7 Amount of contribution (\$) 26.55
8 Principal occupation / Job title (See Instructions) Sr. Copywriter		9 Employer (See Instructions) SWA
Date 5/1/2025	Full name of contributor Elizabeth Ginsberg out-of-state PAC (ID#: Contributor address; Dallas, TX 75230 City; State; Zip Code	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Elizabeth Caldcleugh
Date 5/5/2025	Full name of contributor Victoria Suarez out-of-state PAC (ID#: Contributor address; Richardson, TX 75080 City; State; Zip Code	Amount of contribution (\$) 52.59
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) DISD
Date 5/5/2025	Full name of contributor Donald Silva out-of-state PAC (ID#: Contributor address; Richardson, TX 75080 City; State; Zip Code	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">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 FILER NAME VANESSA PACHECO		3 Filer ID (Ethics Commission Filers)
4 Date 5/5/2025	5 Full name of contributor Sharon Hirsh out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code Addison, TX 75001	7 Amount of contribution (\$) 104.67
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) NA
Date 5/5/2025	Full name of contributor Adam Graham out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code Oklahoma City, OK 73107	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Policitcal Consultant		Employer (See Instructions) Bison Strategies
Date 5/6/2025	Full name of contributor Barbara Miller out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Communities Foundation of TX
Date 5/8/2025	Full name of contributor Taylor O'Leary out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">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 FILER NAME VANESSA PACHECO		3 Filer ID (Ethics Commission Filers)
4 Date 5/9/2025	5 Full name of contributor out-of-state PAC (ID#: Ronson Page 6 Contributor address; City; State; Zip Code Richardson, TX 75081	7 Amount of contribution (\$) 52.59
8 Principal occupation / Job title (See Instructions) Self-Employed		9 Employer (See Instructions) Writer
Date 5/9/2025	Full name of contributor out-of-state PAC (ID#: Emily Villamar -Robins Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of contribution (\$) 26.55
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) NA
Date 5/9/2025	Full name of contributor out-of-state PAC (ID#: Nancy Fisher Contributor address; City; State; Zip Code Garland, TX 75044	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) NA
Date 5/9/2025	Full name of contributor out-of-state PAC (ID#: Jenny McGlothlin Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of contribution (\$) 20.00
Principal occupation / Job title (See Instructions) SLP		Employer (See Instructions) UTD
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:

2 FILER NAME

VANESSA PACHECO

3 Filer ID (Ethics Commission Filers)

4 Date

5/9/2025

5 Full name of contributor

Nivasha Howery

out-of-state PAC (ID#)

6 Contributor address;

City;

State;

Zip Code

Richardson, TX 75080

7 Amount of contribution (\$)

52.59

8 Principal occupation / Job title (See Instructions)

Designer

9 Employer (See Instructions)

Dallas College

Date

5/9/2025

Full name of contributor

Yvette Lacroix

out-of-state PAC (ID#)

Contributor address;

City;

State;

Zip Code

Dallas, TX 75231

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

NA

Date

5/9/2025

Full name of contributor

Angela Keiser

out-of-state PAC (ID#)

Contributor address;

City;

State;

Zip Code

Dallas, TX 75080

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Training

Employer (See Instructions)

City of Carrollton

Date

5/9/2025

Full name of contributor

Andy Sommerman

out-of-state PAC (ID#)

Contributor address;

City;

State;

Zip Code

Dallas, TX 75219

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Sommerman, McCaffity, Quesada & Geisler, LLP

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor 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  
Credit Card PaymentEvent Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal ServicesLoan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract LaborSolicitation/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.

<b>1</b> Total pages Schedule F1: <b>2</b>	<b>2</b> FILER NAME VANESSA PACHECO	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 9/27/2025	<b>5</b> Payee name Wix.com LTD	
<b>6</b> Amount (\$) <b>521.99</b>	<b>7</b> Payee address; City; State; Zip Code [REDACTED] TelAviv, Israel	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description 3yr Domain/Website
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VANESSA PACHECO	Office sought RISD TRUSTEE D2
		Office held RISD TRUSTEE D2
Date 5/30/2025	Payee name PAYPAL	
Amount (\$) 36.50	Payee address; City; State; Zip Code [REDACTED] San Jose, CA 95132	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FUNDRAISING	Description PLATFORM FEE
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VANESSA PACHECO	Office sought RISD TRUSTEE D2
		Office held RISD TRUSTEE D2
Date 5/30/2025	Payee name DONOR BOX / REBEL IDEALIST	
Amount (\$) 19.85	Payee address; City; State; Zip Code [REDACTED] Alexandria, VA 22307	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FUNDRAISING	Description PLATFORM FEE
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VANESSA PACHECO	Office sought RISD TRUSTEE D2
		Office held RISD TRUSTEE D2
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

**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 PaymentEvent Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal ServicesLoan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract LaborSolicitation/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.

<b>1</b> Total pages Schedule F1: 2		<b>2</b> FILER NAME VANESSA PACHECO		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 06/11/2025		<b>5</b> Payee name OMG Cakes & Southern Best Catering LLC			
<b>6</b> Amount (\$) 600.00		<b>7</b> Payee address; City; State; Zip Code Dallas, TX			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description Volunteer Victory Party		
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Vanessa Pacheco		Office sought RISD TRUSTEE D2	Office held RISD TRUSTEE D2
Date 06/15/2025		Payee name Oak Highlands Brewery			
Amount (\$) 315.58		Payee address; City; State; Zip Code Richardson, TX 75080			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expenses		Description Volunteer Victory Party		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Vanessa Pacheco		Office sought RISD Trustee D2	Office held RISD Trustee D2
Date 12/31/2025		Payee name Lamar National Bank			
Amount (\$) 16.00		Payee address; City; State; Zip Code Paris, TX 75460			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description Bank Monthly Fees		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Vanessa Pacheco		Office sought RISD Trustee D2	Office held RISD Trustee D2
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# UNPAID INCURRED OBLIGATIONS

## SCHEDULE F2

If the requested information is not applicable, 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.

<b>1</b> Total pages Schedule F2: 1	<b>2</b> FILER NAME VANESSA PACHECO	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$ 3,000.00
<b>5</b> Date 12/31/2025	<b>6</b> Payee name Vanessa Pacheco	
<b>7</b> Amount (\$) 3,000.00	<b>8</b> Payee address; City; State; Zip Code Richardson, TX 75081	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description Campaign Contribution
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. 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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED