

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**OFFICIAL RECORD  
CITY SECRETARY  
FT. WORTH, TX**

**FORM C/OH  
COVER SHEET PG 1**

|   |  |                          |   |   |
|---|--|--------------------------|---|---|
| The C/OH Instruction Guide explains how to complete this form.  |  | 1 Filer ID               | 2 Total pages filed:<br>32  |   |
| 3 CANDIDATE /<br>OFFICEHOLDER<br>NAME   | MS / MRS / MR  | FIRST<br>Elizabeth       | MI  | OFFICE USE ONLY<br><br>Date Received<br><br><b>CSO REC'D<br/>APR 24 '25 PM12:11</b> |
|   | NICKNAME   | LAST<br>Beck             | SUFFIX  |   |
| 4 CANDIDATE /<br>OFFICEHOLDER<br>MAILING<br>ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY;<br><div style="background-color: black; width: 100px; height: 30px;"></div><br>Fort Worth, TX 76110   |                          | ZIP CODE  |   |
|   | Date Hand-delivered or Date Postmarked   |                          | Receipt #   |   |
|   | Amount   |                          | Date Processed  |   |
|   | Date Imaged  |                          |   |   |
| 5 CAMPAIGN<br>TREASURER<br>NAME   | MS / MRS / MR  | FIRST<br>Eva             | MI  |   |
|   | NICKNAME   | LAST<br>Bonilla          | SUFFIX  |   |
| 6 CAMPAIGN<br>TREASURER<br>ADDRESS<br><br>(Residence or Business)                                     | STREET ADDRESS (NO PO BOX PLEASE);   |                          | APT / SUITE #;  | CITY;   |
|   | 362 Foch St  |                          |   | Fort Worth TX 76107   |
| 7 CAMPAIGN<br>TREASURER<br>PHONE  | AREA CODE<br>817   | PHONE NUMBER<br>360-1256 | EXTENSION   |   |
| 8 REPORT<br>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)<br><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) |                          |   |   |
| 9 PERIOD<br>COVERED   | Month   Day   Year<br>03/25/2025   |                          | Month   Day   Year<br>04/23/2025  |   |
| 10 ELECTION   | ELECTION DATE<br>Month   Day   Year<br>05/03/2025  |                          | ELECTION TYPE   |   |
|   | <input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General  |                          | <input type="checkbox"/> Runoff<br><input type="checkbox"/> Special<br><input type="checkbox"/> Other |   |
| 11 OFFICE   | OFFICE HELD (if any)<br>Fort Worth City Council District 9   |                          | 12 OFFICE SOUGHT (if known)<br>Fort Worth City Council District 9                                     |   |

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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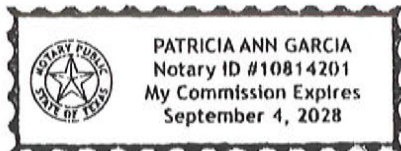
|                                   |             |
|-----------------------------------|-------------|
| 13 C / OH NAME<br>Beck, Elizabeth | 14 Filer ID |
|-----------------------------------|-------------|

|  |  |                                      |
|--|--|--------------------------------------|
| 15 NOTICE FROM POLITICAL COMMITTEE(S)<br><br><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. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> 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 |

|                         |   |               |
|-------------------------|---|---------------|
| 16 CONTRIBUTION TOTALS  | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 0.00       |
|                         | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$ 50,142.00  |
| EXPENDITURE TOTALS      | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES  | \$ 0.00       |
|                         | 4. TOTAL POLITICAL EXPENDITURES   | \$ 101,787.01 |
| CONTRIBUTION BALANCE    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  | \$ 48,894.63  |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$ 0.00       |

## 17 AFFIDAVIT

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.



*Elizabeth Beck*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Elizabeth Beck, this the 24th day of April, 2025, to certify which, witness my hand and seal of office.

*Patricia A. Garcia*  
Signature of officer administering

Patricia A. Garcia  
Printed name of officer administering

*Notary*  
Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3  
3 of 32

|   |  |                 |
|---|--|-----------------|
| 18 FILER NAME<br>Beck, Elizabeth          |  | 19 Filer ID     |
| 20 SCHEDULE SUBTOTALS<br>NAME OF SCHEDULE |  | SUBTOTAL AMOUNT |
| 1.  | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      | \$ 48,942.00    |
| 2.  | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        | \$ 1,200.00     |
| 3.  | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS   | \$              |
| 4.  | <input type="checkbox"/> SCHEDULE E: LOANS   | \$              |
| 5.  | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                   | \$ 101,787.01   |
| 6.  | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  | \$              |
| 7.  | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                             | \$              |
| 8.  | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD   | \$              |
| 9.  | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS  | \$              |
| 10.                                       | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH                        | \$              |
| 11.                                       | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                           | \$              |
| 12.                                       | <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 19,950.00    |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>                       |  | <b>1</b> Total pages Schedule A1:<br>Sch: 1/18 Rpt: 4/32 |
| <b>2</b> FILER NAME<br>Beck, Elizabeth   |  | <b>3</b> Filer ID  |
| <b>4</b> Date<br>04/14/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Adams, Robert<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>2216 Huntington Lane<br><br>Fort Worth, TX 76110 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired                |  | <b>9</b> Employer (See Instructions)<br>NA               |
| Date<br>04/13/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Adams, Victoria A<br><hr/> Contributor address; City; State; Zip Code<br>2330 Medford Court East<br><br>Fort Worth, TX 76109            | Amount of Contribution (\$)<br><br>\$50.00               |
| Principal occupation / Job title (See Instructions)<br>Not Employed                    |  | Employer (See Instructions)<br>Not Employed              |
| Date<br>03/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Amon, Jason<br><hr/> Contributor address; City; State; Zip Code<br>6808 Bellaire Ct S<br><br>Fort Worth, TX 76132                       | Amount of Contribution (\$)<br><br>\$100.00              |
| Principal occupation / Job title (See Instructions)<br>Attorney                        |  | Employer (See Instructions)<br>Self                      |
| Date<br>03/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Angle, John<br><hr/> Contributor address; City; State; Zip Code<br>2749 6th Avenue<br><br>Fort Worth, TX 76110                          | Amount of Contribution (\$)<br><br>\$500.00              |
| Principal occupation / Job title (See Instructions)<br>Consultant                      |  | Employer (See Instructions)<br>AMM Political Strategies  |
| Date<br>03/27/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Arroyo, Guadalupe<br><hr/> Contributor address; City; State; Zip Code<br>2363 Floyd Hampton Road<br><br>Crowley, TX 76036               | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Aircraft Maintenance Technician |  | Employer (See Instructions)<br>American Airlines         |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |   |
|---|--|---|
| The Instruction Guide explains how to complete this form.             |  | 1 Total pages Schedule A1:<br>Sch: 2/18 Rpt: 5/32 |
| 2 FILER NAME<br>Beck, Elizabeth                                       |  | 3 Filer ID  |
| 4 Date<br>03/30/2025  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ball, Sabrina<br>6 Contributor address; City; State; Zip Code<br>1326 Mistletoe Drive<br>Fort Worth, TX 76110 | 7 Amount of Contribution (\$)<br>\$500.00         |
| 8 Principal occupation / Job title (See Instructions)<br>Not Employed |  | 9 Employer (See Instructions)<br>Not Employed     |
| Date<br>04/07/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Barra, Dorothy<br>Contributor address; City; State; Zip Code<br>3408 Cockrell Avenue<br>Fort Worth, TX 76109    | Amount of Contribution (\$)<br>\$20.00            |
| Principal occupation / Job title (See Instructions)<br>Counselor      |  | Employer (See Instructions)<br>Self               |
| Date<br>04/04/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Barrow, Wade<br>Contributor address; City; State; Zip Code<br>1214 Fairmount<br>Fort Worth, TX 76104            | Amount of Contribution (\$)<br>\$250.00           |
| Principal occupation / Job title (See Instructions)<br>Attorney       |  | Employer (See Instructions)<br>Self               |
| Date<br>04/23/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bivens, Gyna<br>Contributor address; City; State; Zip Code<br>5913 McKaskle<br>Fort Worth, TX 76129             | Amount of Contribution (\$)<br>\$250.00           |
| Principal occupation / Job title (See Instructions)<br>President      |  | Employer (See Instructions)<br>NTLEAD             |
| Date<br>04/09/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brender, Lynda<br>Contributor address; City; State; Zip Code<br>1600 Texas St<br>Fort Worth, TX 76102           | Amount of Contribution (\$)<br>\$1,000.00         |
| Principal occupation / Job title (See Instructions)<br>Not Employed   |  | Employer (See Instructions)<br>Not Employed       |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 3/18 Rpt: 6/32 |
| <b>2</b> FILER NAME<br>Beck, Elizabeth                                       |   | <b>3</b> Filer ID  |
| <b>4</b> Date<br>04/16/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brewer, William<br><b>6</b> Contributor address; City; State; Zip Code<br>408 Templeton<br><br>Fort Worth, TX 76107 | <b>7</b> Amount of Contribution (\$)<br><br>\$2,500.00   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Investor     |   | <b>9</b> Employer (See Instructions)<br>Brewer Capital   |
| Date<br>04/17/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bronstein, Dale<br>Contributor address; City; State; Zip Code<br>7700 Meadowbrook Drive<br><br>Fort Worth, TX 76112          | Amount of Contribution (\$)<br><br>\$5.00                |
| Principal occupation / Job title (See Instructions)<br>Wine Merchant         |   | Employer (See Instructions)<br>Mr.                       |
| Date<br>03/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brooks, Richard<br>Contributor address; City; State; Zip Code<br>1900 6th Avenue C<br><br>Fort Worth, TX 76110               | Amount of Contribution (\$)<br><br>\$50.00               |
| Principal occupation / Job title (See Instructions)<br>Healthcare            |   | Employer (See Instructions)<br>Texas Health Resources    |
| Date<br>03/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brothers, Gail<br>Contributor address; City; State; Zip Code<br>4230 CLEAR LAKE CIRCLE<br><br>FORT WORTH, TX 76109-4903      | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Clinical psychologist |   | Employer (See Instructions)<br>Dr Gail Brothers          |
| Date<br>04/19/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brown, Drew<br>Contributor address; City; State; Zip Code<br>4925 Vega Court East<br><br>Fort Worth, TX 76133                | Amount of Contribution (\$)<br><br>\$50.00               |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed              |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |   |
|--|--|---|
| The Instruction Guide explains how to complete this form.              |  | 1 Total pages Schedule A1:<br>Sch: 4/18 Rpt: 7/32 |
| 2 FILER NAME<br>Beck, Elizabeth  |  | 3 Filer ID  |
| 4 Date<br>04/14/2025   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brown, Steve<br>6 Contributor address; City; State; Zip Code<br>1409 Summit Ave<br>Fort Worth, TX 76102       | 7 Amount of Contribution (\$)<br>\$2,000.00       |
| 8 Principal occupation / Job title (See Instructions)<br>Sendera Title |  | 9 Employer (See Instructions)<br>Attorney         |
| Date<br>04/01/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brunnert, Patti<br>Contributor address; City; State; Zip Code<br>6309 BRAMBLE DR<br>Fort Worth, TX 76133        | Amount of Contribution (\$)<br>\$10.00            |
| Principal occupation / Job title (See Instructions)<br>School nurse    |  | Employer (See Instructions)<br>FWISD              |
| Date<br>03/25/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Burns, Joel<br>Contributor address; City; State; Zip Code<br>2420 S Adams St<br>Fort Worth, TX 76110            | Amount of Contribution (\$)<br>\$500.00           |
| Principal occupation / Job title (See Instructions)<br>Not Employed    |  | Employer (See Instructions)<br>None               |
| Date<br>04/07/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Camp, Claudia<br>Contributor address; City; State; Zip Code<br>2212 Mistletoe Boulevard<br>Fort Worth, TX 76110 | Amount of Contribution (\$)<br>\$100.00           |
| Principal occupation / Job title (See Instructions)<br>Not Employed    |  | Employer (See Instructions)<br>Not Employed       |
| Date<br>04/12/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Clark, Cary<br>Contributor address; City; State; Zip Code<br>3217 West Biddison ST<br>Fort Worth, TX 76109      | Amount of Contribution (\$)<br>\$50.00            |
| Principal occupation / Job title (See Instructions)<br>Not Employed    |  | Employer (See Instructions)<br>Not Employed       |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |   |
|--|--|---|
| The Instruction Guide explains how to complete this form.                        |  | 1 Total pages Schedule A1:<br>Sch: 5/18 Rpt: 8/32             |
| 2 FILER NAME<br>Beck, Elizabeth  |  | 3 Filer ID  |
| 4 Date<br>03/29/2025   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cobb, William     | 7 Amount of Contribution (\$)<br>\$100.00                     |
|  | 6 Contributor address; City; State; Zip Code<br>3429 Medina Ave<br><br>Fort Worth, TX 76133            |   |
| 8 Principal occupation / Job title (See Instructions)<br>Not Employed            |  | 9 Employer (See Instructions)<br>Not Employed                 |
| Date<br>04/15/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cordell, Andrew     | Amount of Contribution (\$)<br>\$50.00                        |
|  | Contributor address; City; State; Zip Code<br>6508 Whitman Ave<br><br>Fort Worth, TX 76133             |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed              |  | Employer (See Instructions)<br>Not Employed                   |
| Date<br>04/02/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Curtis, Christopher | Amount of Contribution (\$)<br>\$100.00                       |
|  | Contributor address; City; State; Zip Code<br>2125 Hurley Ave.<br><br>Fort Worth, TX 76110             |   |
| Principal occupation / Job title (See Instructions)<br>Artist/attorney/professor |  | Employer (See Instructions)<br>TCU                            |
| Date<br>04/01/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Davidson, Logan     | Amount of Contribution (\$)<br>\$25.00                        |
|  | Contributor address; City; State; Zip Code<br>1000 San Marcos St Apt 366<br><br>Austin, TX 78702       |   |
| Principal occupation / Job title (See Instructions)<br>Legislative Director      |  | Employer (See Instructions)<br>Texas House of Representatives |
| Date<br>04/14/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Davis, John         | Amount of Contribution (\$)<br>\$50.00                        |
|  | Contributor address; City; State; Zip Code<br>3216 rogers ave<br><br>fort worth, TX 76109              |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed              |  | Employer (See Instructions)<br>Not Employed                   |



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

|   |   |   |
|---|---|---|
| The Instruction Guide explains how to complete this form.                                   |   | 1 Total pages Schedule A1:<br>Sch: 6/18 Rpt: 9/32 |
| 2 FILER NAME<br>Beck, Elizabeth   |   | 3 Filer ID  |
| 4 Date<br>04/02/2025  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Deleon Campaign Committee<br>6 Contributor address; City; State; Zip Code<br>PO Box 470743<br>Fort Worth, TX 76147 | 7 Amount of Contribution (\$)<br>\$200.00         |
| 8 Principal occupation / Job title (See Instructions)                                       |   | 9 Employer (See Instructions)                     |
| Date<br>04/14/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Diehl, Barbara<br>Contributor address; City; State; Zip Code<br>2216 Lipscomb<br>Fort Worth, TX 76110                | Amount of Contribution (\$)<br>\$100.00           |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                       |
| Date<br>03/29/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Dishion, Catherine<br>Contributor address; City; State; Zip Code<br>1370 Holiday Hill Road<br>Goleta, CA 93117       | Amount of Contribution (\$)<br>\$10.00            |
| Principal occupation / Job title (See Instructions)<br>Architectural and Hardscape Designer |   | Employer (See Instructions)<br>Spaces by Design   |
| Date<br>04/17/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Dunn, Melissa<br>Contributor address; City; State; Zip Code<br>411 W 7th St. Apt 602<br>Fort Worth, TX 76102         | Amount of Contribution (\$)<br>\$250.00           |
| Principal occupation / Job title (See Instructions)<br>Realtor                              |   | Employer (See Instructions)<br>Self               |
| Date<br>04/02/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Eichler, Anthony<br>Contributor address; City; State; Zip Code<br>1612 Lipscomb St<br>Fort Worth, TX 76104           | Amount of Contribution (\$)<br>\$50.00            |
| Principal occupation / Job title (See Instructions)<br>Attorney                             |   | Employer (See Instructions)<br>Self               |

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

|   |   |  |
|---|---|--|
| The Instruction Guide explains how to complete this form.             |   | 1 Total pages Schedule A1:<br>Sch: 7/18 Rpt: 10/32 |
| 2 FILER NAME<br>Beck, Elizabeth                                       |   | 3 Filer ID   |
| 4 Date<br>04/10/2025  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Feit, Rachel   | 7 Amount of Contribution (\$)<br>\$50.00           |
|   | 6 Contributor address; City; State; Zip Code<br>1800 6TH AVENUE<br><br>FORT WORTH, TX 76110   |  |
| 8 Principal occupation / Job title (See Instructions)<br>Manager      |   | 9 Employer (See Instructions)<br>Deloitte          |
| Date<br>04/02/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Firth, Riley   | Amount of Contribution (\$)<br>\$10.00             |
|   | Contributor address; City; State; Zip Code<br>102 Goldstein Gate Dr Apt. 8102<br><br>Fort Worth, TX 76140                                 |  |
| Principal occupation / Job title (See Instructions)<br>Patient Safety |   | Employer (See Instructions)<br>Alcon               |
| Date<br>04/02/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Fort Worth Firefighters Committee for Responsible Govt | Amount of Contribution (\$)<br>\$15,000.00         |
|   | Contributor address; City; State; Zip Code<br>3855 Tulsa Way<br><br>Fort Worth, TX 76107  |  |
| Principal occupation / Job title (See Instructions)                   |   | Employer (See Instructions)                        |
| Date<br>04/14/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Fort Worth Firefighters Committee for Responsible Govt | Amount of Contribution (\$)<br>\$10,000.00         |
|   | Contributor address; City; State; Zip Code<br>3855 Tulsa Way<br><br>Fort Worth, TX 76107  |  |
| Principal occupation / Job title (See Instructions)                   |   | Employer (See Instructions)                        |
| Date<br>04/15/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Freer, Jill  | Amount of Contribution (\$)<br>\$100.00            |
|   | Contributor address; City; State; Zip Code<br>2916 Merrimac St<br><br>Fort Worth, TX 76107  |  |
| Principal occupation / Job title (See Instructions)<br>Retired        |   | Employer (See Instructions)<br>Retired             |

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

|   |  |  |
|---|--|--|
| The Instruction Guide explains how to complete this form.                                       |  | 1 Total pages Schedule A1:<br>Sch: 8/18 Rpt: 11/32 |
| 2 FILER NAME<br>Beck, Elizabeth   |  | 3 Filer ID   |
| 4 Date<br>04/04/2025  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hanks, Nathan | 7 Amount of Contribution (\$)<br>\$1,000.00        |
|   | 6 Contributor address; City; State; Zip Code<br>4256 Park Lane<br><br>Dallas, TX 75220             |  |
| 8 Principal occupation / Job title (See Instructions)<br>CEO                                    |  | 9 Employer (See Instructions)<br>MAX.Live          |
| Date<br>04/04/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hanks, Nathan   | Amount of Contribution (\$)<br>\$1,000.00          |
|   | Contributor address; City; State; Zip Code<br>4256 Park Lane<br><br>Dallas, TX 75220               |  |
| Principal occupation / Job title (See Instructions)<br>CEO                                      |  | Employer (See Instructions)<br>MAX.Live            |
| Date<br>04/09/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hedden, Julia   | Amount of Contribution (\$)<br>\$100.00            |
|   | Contributor address; City; State; Zip Code<br>3300 Worth Hills Dr<br><br>Fort Worth, TX 76109      |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed                             |  | Employer (See Instructions)<br>Not Employed        |
| Date<br>03/26/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hoernke, Aaron  | Amount of Contribution (\$)<br>\$250.00            |
|   | Contributor address; City; State; Zip Code<br>6917 Bal Lake Dr<br><br>Fort Worth, TX 76116         |  |
| Principal occupation / Job title (See Instructions)<br>Marketing                                |  | Employer (See Instructions)<br>Frank Kent          |
| Date<br>04/15/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hyder, Geoffrey | Amount of Contribution (\$)<br>\$50.00             |
|   | Contributor address; City; State; Zip Code<br>5116 Collinwood Ave<br><br>Fort Worth, TX 76107      |  |
| Principal occupation / Job title (See Instructions)<br>Communications and Marketing Coordinator |  | Employer (See Instructions)<br>The Cliburn         |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 9/18 Rpt: 12/32           |
| <b>2</b> FILER NAME<br>Beck, Elizabeth                                       |   | <b>3</b> Filer ID   |
| <b>4</b> Date<br>04/14/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>I McMillan, Jonathan<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>1904 5th Ave<br><br>FORT WORTH, TX 76110 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00                |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Head of IT   |   | <b>9</b> Employer (See Instructions)<br>Kimbell Art Museum          |
| Date<br>03/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Johnson, Ashlee<br><hr/> Contributor address; City; State; Zip Code<br>5340 Quail Run St<br><br>Fort Worth, TX 76107                   | Amount of Contribution (\$)<br><br>\$250.00                         |
| Principal occupation / Job title (See Instructions)<br>General Manager       |   | Employer (See Instructions)<br>The Ashton Depot Catering and Events |
| Date<br>04/20/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Johnson, Barry<br><hr/> Contributor address; City; State; Zip Code<br>3401 Lawndale Ave<br><br>Fort Worth, TX 76133                    | Amount of Contribution (\$)<br><br>\$100.00                         |
| Principal occupation / Job title (See Instructions)<br>Lawyer                |   | Employer (See Instructions)<br>Self                                 |
| Date<br>03/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Joseph, Sara<br><hr/> Contributor address; City; State; Zip Code<br>5228 Park Drive<br><br>River Oaks, TX 76114                        | Amount of Contribution (\$)<br><br>\$25.00                          |
| Principal occupation / Job title (See Instructions)<br>HR Director           |   | Employer (See Instructions)<br>Apex Capital                         |
| Date<br>04/07/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Leach, Leslie<br><hr/> Contributor address; City; State; Zip Code<br>4765 South Ridge Terrace<br><br>Fort Worth, TX 76133              | Amount of Contribution (\$)<br><br>\$25.00                          |
| Principal occupation / Job title (See Instructions)<br>Director of Resources |   | Employer (See Instructions)<br>MMBNT                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |   |
|---|---|---|
| The Instruction Guide explains how to complete this form.               |   | 1 Total pages Schedule A1:<br>Sch: 10/18 Rpt: 13/32 |
| 2 FILER NAME<br>Beck, Elizabeth   |   | 3 Filer ID  |
| 4 Date<br>03/27/2025  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>MAY, JESSE         | 7 Amount of Contribution (\$)<br><br>\$50.00        |
|   | 6 Contributor address; City; State; Zip Code<br>4132 HILDRING DR E<br><br>FT WORTH, TX 76109            |   |
| 8 Principal occupation / Job title (See Instructions)<br>Not Employed   |   | 9 Employer (See Instructions)<br>Not Employed       |
| Date<br>04/02/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>MacMartin, Alexandra | Amount of Contribution (\$)<br><br>\$100.00         |
|   | Contributor address; City; State; Zip Code<br>1620 Lipscomb St<br><br>Fort Worth, TX 76104              |   |
| Principal occupation / Job title (See Instructions)<br>CPA              |   | Employer (See Instructions)<br>SFC LLP              |
| Date<br>03/26/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Maness, Tina         | Amount of Contribution (\$)<br><br>\$250.00         |
|   | Contributor address; City; State; Zip Code<br>615 NE Mcalister Road<br><br>Burleson, TX 76028           |   |
| Principal occupation / Job title (See Instructions)<br>Manager          |   | Employer (See Instructions)<br>Huguley Hospital     |
| Date<br>03/26/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Matson, Andrew       | Amount of Contribution (\$)<br><br>\$150.00         |
|   | Contributor address; City; State; Zip Code<br>8001 Hencken Ranch Rd.<br><br>Fort Worth, TX 76126        |   |
| Principal occupation / Job title (See Instructions)<br>Senior Recruiter |   | Employer (See Instructions)<br>TRG                  |
| Date<br>04/14/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Minker, Carol        | Amount of Contribution (\$)<br><br>\$250.00         |
|   | Contributor address; City; State; Zip Code<br>2865 Manorwood trail<br><br>Fort Worth, TX 76109          |   |
| Principal occupation / Job title (See Instructions)<br>travel agent     |   | Employer (See Instructions)<br>sanders travel       |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |  |
|---|--|--|
| The Instruction Guide explains how to complete this form.             |  | 1 Total pages Schedule A1:<br>Sch: 11/18 Rpt: 14/32              |
| 2 FILER NAME<br>Beck, Elizabeth                                       |  | 3 Filer ID   |
| 4 Date<br>04/16/2025  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Moore, Brenda<br>6 Contributor address; City; State; Zip Code<br>3816 Cheyenne St<br>Irving, TX 75038         | 7 Amount of Contribution (\$)<br>\$25.00                         |
| 8 Principal occupation / Job title (See Instructions)<br>Not Employed |  | 9 Employer (See Instructions)<br>Not Employed                    |
| Date<br>03/27/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Newsome, Bill<br>Contributor address; City; State; Zip Code<br>2800 Sandage Avenue #103<br>Fort Worth, TX 76109 | Amount of Contribution (\$)<br>\$50.00                           |
| Principal occupation / Job title (See Instructions)<br>Real Estate    |  | Employer (See Instructions)<br>Newsome Development & Investments |
| Date<br>04/08/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Nigro, Mary<br>Contributor address; City; State; Zip Code<br>36 Petticoat Bridge Road<br>Columbus, NJ 08022     | Amount of Contribution (\$)<br>\$25.00                           |
| Principal occupation / Job title (See Instructions)<br>Not Employed   |  | Employer (See Instructions)<br>Not Employed                      |
| Date<br>04/08/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Northern, Will<br>Contributor address; City; State; Zip Code<br>1405 Elizabeth Blvd.<br>Fort Worth, TX 76110    | Amount of Contribution (\$)<br>\$150.00                          |
| Principal occupation / Job title (See Instructions)<br>Business owner |  | Employer (See Instructions)<br>N/a                               |
| Date<br>04/14/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Odient, Christopher<br>Contributor address; City; State; Zip Code<br>650 S Governor St<br>Iowa City, IA 52240   | Amount of Contribution (\$)<br>\$500.00                          |
| Principal occupation / Job title (See Instructions)<br>Self           |  | Employer (See Instructions)<br>Self                              |



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

|  |  |   |
|--|--|---|
| The Instruction Guide explains how to complete this form.                  |  | 1 Total pages Schedule A1:<br>Sch: 12/18 Rpt: 15/32 |
| 2 FILER NAME<br>Beck, Elizabeth  |  | 3 Filer ID  |
| 4 Date<br>04/21/2025   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pavlik, Linda               | 7 Amount of Contribution (\$)<br>\$200.00           |
|  | 6 Contributor address; City; State; Zip Code<br>1200 Summit #770 Fort Worth TX 76102<br><br>Fort Worth, TX 76102 |   |
| 8 Principal occupation / Job title (See Instructions)<br>consultant        |  | 9 Employer (See Instructions)<br>self               |
| Date<br>04/12/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Peavy III, Stan               | Amount of Contribution (\$)<br>\$50.00              |
|  | Contributor address; City; State; Zip Code<br>500 Throckmorton Street Unit #1810<br><br>Fort Worth, TX 76102     |   |
| Principal occupation / Job title (See Instructions)<br>Attorney            |  | Employer (See Instructions)<br>Peavy Law Firm       |
| Date<br>03/31/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Permenter, Jennifer           | Amount of Contribution (\$)<br>\$500.00             |
|  | Contributor address; City; State; Zip Code<br>14643 Dallas Parkway Suite 950<br><br>Dallas, TX 75254             |   |
| Principal occupation / Job title (See Instructions)<br>Co-Managing Partner |  | Employer (See Instructions)<br>Younger Partners     |
| Date<br>03/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pinto, Masumi                 | Amount of Contribution (\$)<br>\$50.00              |
|  | Contributor address; City; State; Zip Code<br>1012 Burnett St Apt 1502<br><br>Fort Worth, TX 76102               |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed        |  | Employer (See Instructions)<br>Not Employed         |
| Date<br>04/15/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pipes, Kasey                  | Amount of Contribution (\$)<br>\$500.00             |
|  | Contributor address; City; State; Zip Code<br>3700 Country Club Circle<br><br>Fort Worth, TX 76109               |   |
| Principal occupation / Job title (See Instructions)<br>President           |  | Employer (See Instructions)<br>The Pipes Company    |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| The Instruction Guide explains how to complete this form.                      |   | 1 Total pages Schedule A1:<br>Sch: 13/18 Rpt: 16/32       |
| 2 FILER NAME<br>Beck, Elizabeth  |   | 3 Filer ID  |
| 4 Date<br>03/26/2025   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Puente, Candice<br>6 Contributor address; City; State; Zip Code<br>1109 Griggs Ave<br>Fort Worth, TX 76105 | 7 Amount of Contribution (\$)<br>\$35.00                  |
| 8 Principal occupation / Job title (See Instructions)<br>Not Employed          |   | 9 Employer (See Instructions)<br>Not Employed             |
| Date<br>03/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Raines, Jeremy<br>Contributor address; City; State; Zip Code<br>2313 Ashland Ave<br>Fort Worth, TX 76107     | Amount of Contribution (\$)<br>\$250.00                   |
| Principal occupation / Job title (See Instructions)<br>President               |   | Employer (See Instructions)<br>RMP Industrial Supply Inc. |
| Date<br>03/28/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ramsey, Michael<br>Contributor address; City; State; Zip Code<br>6 Carla Circle<br>B, AL 35213               | Amount of Contribution (\$)<br>\$1,000.00                 |
| Principal occupation / Job title (See Instructions)<br>Investment Professional |   | Employer (See Instructions)<br>Michael Ramsey             |
| Date<br>04/02/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Riley, Joseph<br>Contributor address; City; State; Zip Code<br>2668 Saupp Drive<br>Batavia, IL 60510         | Amount of Contribution (\$)<br>\$1,000.00                 |
| Principal occupation / Job title (See Instructions)<br>Media                   |   | Employer (See Instructions)<br>CHSN                       |
| Date<br>04/14/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ross, Robert<br>Contributor address; City; State; Zip Code<br>6021 Walraven Cir.<br>Fort Worth, TX 76133     | Amount of Contribution (\$)<br>\$25.00                    |
| Principal occupation / Job title (See Instructions)<br>Not Employed            |   | Employer (See Instructions)<br>Not Employed               |

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

|  |   |  |
|--|---|--|
| The Instruction Guide explains how to complete this form.            |   | 1 Total pages Schedule A1:<br>Sch: 14/18 Rpt: 17/32        |
| 2 FILER NAME<br>Beck, Elizabeth                                      |   | 3 Filer ID   |
| 4 Date<br>04/09/2025   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>S Zachry, Andrew | 7 Amount of Contribution (\$)<br><br>\$100.00              |
|  | 6 Contributor address; City; State; Zip Code<br>2204 Alston Ave<br><br>Fort Worth, TX 76110           |  |
| 8 Principal occupation / Job title (See Instructions)<br>Educator    |   | 9 Employer (See Instructions)<br>Fort Worth ISD            |
| Date<br>03/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Shetter, Kenneth   | Amount of Contribution (\$)<br><br>\$250.00                |
|  | Contributor address; City; State; Zip Code<br>2740 Ryan Place Dr<br><br>Fort Worth, TX 76110          |  |
| Principal occupation / Job title (See Instructions)<br>Attorney      |   | Employer (See Instructions)<br>One Safe Place              |
| Date<br>04/15/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Smith, Jack        | Amount of Contribution (\$)<br><br>\$27.00                 |
|  | Contributor address; City; State; Zip Code<br>3832 Cresthill Rd.<br><br>Benbrook, TX 76116            |  |
| Principal occupation / Job title (See Instructions)<br>Not employed  |   | Employer (See Instructions)<br>Not employed                |
| Date<br>04/02/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Smith, Kelly       | Amount of Contribution (\$)<br><br>\$250.00                |
|  | Contributor address; City; State; Zip Code<br>6508 Genoa Rd<br><br>Fort Worth, TX 76116               |  |
| Principal occupation / Job title (See Instructions)<br>Restaurantuer |   | Employer (See Instructions)<br>Tommy's Hamburger Grill Inc |
| Date<br>03/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sorensen, David    | Amount of Contribution (\$)<br><br>\$10.00                 |
|  | Contributor address; City; State; Zip Code<br>5514 Marcus St 5<br><br>Houston, TX 77026               |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed  |   | Employer (See Instructions)<br>Not Employed                |



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |  |   |
|---|--|---|
| The Instruction Guide explains how to complete this form.                 |  | 1 Total pages Schedule A1:<br>Sch: 15/18 Rpt: 18/32 |
| 2 FILER NAME<br>Beck, Elizabeth   |  | 3 Filer ID  |
| 4 Date<br>03/26/2025  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Stevens, Taunya<br>6 Contributor address; City; State; Zip Code<br>1813 Saxony<br>Fort Worth, TX 76116            | 7 Amount of Contribution (\$)<br>\$750.00           |
| 8 Principal occupation / Job title (See Instructions)<br>Vp               |  | 9 Employer (See Instructions)<br>Miinc              |
| Date<br>04/22/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Stimpson, Ty<br>Contributor address; City; State; Zip Code<br>4113 RIDGLEA COUNTRY CLUB DRIVE<br>Benbrook, TX 76126 | Amount of Contribution (\$)<br>\$500.00             |
| Principal occupation / Job title (See Instructions)<br>Attorney           |  | Employer (See Instructions)<br>Varghese Summersett  |
| Date<br>04/08/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Suasnovar, Leah<br>Contributor address; City; State; Zip Code<br>1422 6th Avenue<br>Fort Worth, TX 76104-4354       | Amount of Contribution (\$)<br>\$20.00              |
| Principal occupation / Job title (See Instructions)<br>Project Specialist |  | Employer (See Instructions)<br>TCC                  |
| Date<br>03/31/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Swenson, Anne E<br>Contributor address; City; State; Zip Code<br>6629 York Street<br>Fort Worth, TX 76132           | Amount of Contribution (\$)<br>\$2,600.00           |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |  | Employer (See Instructions)<br>Not Employed         |
| Date<br>04/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>T. York, Terrell<br>Contributor address; City; State; Zip Code<br>3500 River Oaks Drive<br>New Orleans, LA 70131    | Amount of Contribution (\$)<br>\$25.00              |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |  | Employer (See Instructions)<br>Not Employed         |

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

|  |  |   |
|--|--|---|
| The Instruction Guide explains how to complete this form.                      |  | 1 Total pages Schedule A1:<br>Sch: 16/18 Rpt: 19/32 |
| 2 FILER NAME<br>Beck, Elizabeth  |  | 3 Filer ID  |
| 4 Date<br>03/26/2025   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Thistlethwaite, Randall | 7 Amount of Contribution (\$)<br>\$110.00           |
|  | 6 Contributor address; City; State; Zip Code<br>2028 Wilshire Blvd<br><br>Fort Worth, TX 76110               |   |
| 8 Principal occupation / Job title (See Instructions)<br>Not Employed          |  | 9 Employer (See Instructions)<br>Not Employed       |
| Date<br>03/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Voigt, Christine J        | Amount of Contribution (\$)<br>\$30.00              |
|  | Contributor address; City; State; Zip Code<br>2615 5th Avenur<br><br>Fort Worth, TX 76110                    |   |
| Principal occupation / Job title (See Instructions)<br>Not employed            |  | Employer (See Instructions)<br>Not employed         |
| Date<br>03/29/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Weiner, Paula             | Amount of Contribution (\$)<br>\$5.00               |
|  | Contributor address; City; State; Zip Code<br>28302 Seamount Dr.<br><br>Rancho Palos Verdes, CA 90275        |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed            |  | Employer (See Instructions)<br>Not Employed         |
| Date<br>04/04/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Weinstein, Hilary         | Amount of Contribution (\$)<br>\$1,000.00           |
|  | Contributor address; City; State; Zip Code<br>3100 W 7th St Apt 803<br><br>Fort Worth, TX 76107              |   |
| Principal occupation / Job title (See Instructions)<br>Counsel                 |  | Employer (See Instructions)<br>Independent          |
| Date<br>04/16/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Wells, Mary               | Amount of Contribution (\$)<br>\$50.00              |
|  | Contributor address; City; State; Zip Code<br>1012 Burnett St<br><br>Fort Worth, TX 76102                    |   |
| Principal occupation / Job title (See Instructions)<br>Real estate development |  | Employer (See Instructions)<br>Self employed        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 17/18 Rpt: 20/32 |
| <b>2</b> FILER NAME<br>Beck, Elizabeth                                       |  | <b>3</b> Filer ID  |
| <b>4</b> Date<br>03/26/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Whitton, James<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>100 Main Street<br><br>Fort Worth, TX 76102 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed       |
| Date<br>04/08/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Wilcox, Susan<br><hr/> Contributor address; City; State; Zip Code<br>2600 W 7th St Apt 2650<br><br>Fort Worth, TX 76107             | Amount of Contribution (\$)<br><br>\$250.00                |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                |
| Date<br>03/27/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Williams, Stephen<br><hr/> Contributor address; City; State; Zip Code<br>5828 Waltham Ave.<br><br>Fort Worth, TX 76133              | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired               |  | Employer (See Instructions)<br>Retired                     |
| Date<br>03/31/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Younger, Moody<br><hr/> Contributor address; City; State; Zip Code<br>14643 Dallas Parkway Suite 950<br><br>Dallas, TX 75254        | Amount of Contribution (\$)<br><br>\$500.00                |
| Principal occupation / Job title (See Instructions)<br>Co-Managing Partner   |  | Employer (See Instructions)<br>Younger Partners            |
| Date<br>03/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>look, frances<br><hr/> Contributor address; City; State; Zip Code<br>1024 Lilac St<br><br>Fort Worth, TX 76110                      | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Medicare Sales        |  | Employer (See Instructions)<br>self                        |



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

|   |   |   |
|---|---|---|
| The Instruction Guide explains how to complete this form.             |   | 1 Total pages Schedule A1:<br>Sch: 18/18 Rpt: 21/32 |
| 2 FILER NAME<br>Beck, Elizabeth                                       |   | 3 Filer ID  |
| 4 Date<br>04/10/2025  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>myers, karen         | 7 Amount of Contribution (\$) \$25.00               |
|   | 6 Contributor address; City; State; Zip Code<br>6401 Ridglea Crest Drive<br><br>Fort Worth, TX 76116-8156 |   |
| 8 Principal occupation / Job title (See Instructions)<br>Not Employed |   | 9 Employer (See Instructions)<br>Not Employed       |
| Date<br>04/07/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>phillips, greg         | Amount of Contribution (\$) \$50.00                 |
|   | Contributor address; City; State; Zip Code<br>724 pennsylvania avenue<br><br>fort worth, TX 76104         |   |
| Principal occupation / Job title (See Instructions)<br>physician      |   | Employer (See Instructions)<br>self                 |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:  
Sch: 1/1 Rpt: 22/32

2 FILER NAME

Beck, Elizabeth

3 Filer ID

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date  
04/23/2025

6 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Lone Star Project Non-Federal

7 Contributor address; City; State; Zip Code  
6 E Street Southeast

Washington, DC 20003

8 Amount of  
contribution (\$)  
\$1,200.00

9 In-kind contribution  
description  
Research

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

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

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

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract 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:<br>Sch: 1/9 Rpt: 23/32            |  | 2 FILER NAME<br>Beck, Elizabeth  |  | 3 Filer ID  |  |
| 4 Date<br>04/01/2025   |  | 5 Payee name<br>ActBlue  |  |   |  |
| 6 Amount (\$)<br>\$376.53                                    |  | 7 Payee address; City; State; Zip Code<br>PO Box 441146<br><br>Somerville, MA 02144    |  |   |  |
| 8 PURPOSE OF EXPENDITURE                                     |  | (a) Category (See Categories listed at the top of this schedule)<br>Fees               |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Credit Card Processing Fee |  |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>04/16/2025   |  | Payee name<br>Bank of America  |  |   |  |
| Amount (\$)<br>\$30.00                                       |  | Payee address; City; State; Zip Code<br>PO Box 15284<br><br>Wilmington, DE 19850       |  |   |  |
| PURPOSE OF EXPENDITURE                                       |  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Wire Fee                   |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>04/10/2025   |  | Payee name<br>Bank of America  |  |   |  |
| Amount (\$)<br>\$30.00                                       |  | Payee address; City; State; Zip Code<br>PO Box 15284<br><br>Wilmington, DE 19850       |  |   |  |
| PURPOSE OF EXPENDITURE                                       |  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Wire Fee                   |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract 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:<br>Sch: 2/9 Rpt: 24/32            | 2 FILER NAME<br>Beck, Elizabeth  | 3 Filer ID  |
| 4 Date<br>04/08/2025   | 5 Payee name<br>Bank of America  |   |
| 6 Amount (\$)<br>\$30.00                                     | 7 Payee address; City; State; Zip Code<br>PO Box 15284<br><br>Wilmington, DE 19850     |   |
| 8 PURPOSE OF EXPENDITURE                                     | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Wire Fee |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  |   |
| Date<br>04/07/2025   | Candidate/Officeholder name  | Office sought Office held   |
| Payee name<br>Bank of America                                |  |   |
| Amount (\$)<br>\$30.00                                       | Payee address; City; State; Zip Code<br>PO Box 15284<br><br>Wilmington, DE 19850       |   |
| PURPOSE OF EXPENDITURE                                       | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Wire Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  |   |
| Date<br>04/09/2025   | Candidate/Officeholder name  | Office sought Office held   |
| Payee name<br>Bank of America                                |  |   |
| Amount (\$)<br>\$15.00                                       | Payee address; City; State; Zip Code<br>PO Box 15284<br><br>Wilmington, DE 19850       |   |
| PURPOSE OF EXPENDITURE                                       | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Wire Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract 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:<br>Sch: 3/9 Rpt: 25/32            |  | 2 FILER NAME<br>Beck, Elizabeth  |  | 3 Filer ID  |  |
| 4 Date<br>04/04/2025   |  | 5 Payee name<br>Bank of America  |  |   |  |
| 6 Amount (\$)<br>\$5.00                                      |  | 7 Payee address; City; State; Zip Code<br>PO Box 15284<br><br>Wilmington, DE 19850     |  |   |  |
| 8 PURPOSE OF EXPENDITURE                                     |  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |  |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>04/11/2025   |  | Payee name<br>Bank of America  |  |   |  |
| Amount (\$)<br>\$5.00  |  | Payee address; City; State; Zip Code<br>PO Box 15284<br><br>Wilmington, DE 19850       |  |   |  |
| PURPOSE OF EXPENDITURE                                       |  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>04/02/2025   |  | Payee name<br>Bank of America  |  |   |  |
| Amount (\$)<br>\$25.00                                       |  | Payee address; City; State; Zip Code<br>PO Box 15284<br><br>Wilmington, DE 19850       |  |   |  |
| PURPOSE OF EXPENDITURE                                       |  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## 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  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract 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:<br>Sch: 4/9 Rpt: 26/32            | 2 FILER NAME<br>Beck, Elizabeth   | 3 Filer ID  |
| 4 Date<br>04/23/2025   | 5 Payee name<br>Bank of America   |   |
| 6 Amount (\$)<br>\$30.00                                     | 7 Payee address; City; State; Zip Code<br>PO Box 15284<br><br>Wilmington, DE 19850              |   |
| 8 PURPOSE OF EXPENDITURE                                     | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Wire Fee |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>03/26/2025   | Payee name<br>Bank of America   |   |
| Amount (\$)<br>\$30.00                                       | Payee address; City; State; Zip Code<br>PO Box 15284<br><br>Wilmington, DE 19850                |   |
| PURPOSE OF EXPENDITURE                                       | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Wire Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>03/26/2025   | Payee name<br>Frederick Polls   |   |
| Amount (\$)<br>\$11,500.00                                   | Payee address; City; State; Zip Code<br>350 South 200 East #722<br><br>Salt Lake City, UT 84111 |   |
| PURPOSE OF EXPENDITURE                                       | (a) Category (See Categories listed at the top of this schedule)<br>Polling Expense             | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Poll     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held   |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract 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:<br>Sch: 5/9 Rpt: 27/32     | 2 FILER NAME<br>Beck, Elizabeth   | 3 Filer ID   |
| 4 Date<br>04/16/2025                                  | 5 Payee name<br>Golden Peak Strategies  |  |
| 6 Amount (\$)<br>\$14,689.00                          | 7 Payee address; City; State; Zip Code<br>PO Box 5930<br><br>Vail, CO 81658             |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Direct Mail |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>04/10/2025                                    | Payee name<br>Golden Peak Strategies  |  |
| Amount (\$)<br>\$7,344.50                             | Payee address; City; State; Zip Code<br>PO Box 5930<br><br>Vail, CO 81658               |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Direct Mail |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>04/07/2025                                    | Payee name<br>Golden Peak Strategies  |  |
| Amount (\$)<br>\$7,344.50                             | Payee address; City; State; Zip Code<br>PO Box 5930<br><br>Vail, CO 81658               |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Direct Mail |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract 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:<br>Sch: 6/9 Rpt: 28/32            | 2 FILER NAME<br>Beck, Elizabeth  | 3 Filer ID   |
| 4 Date<br>04/03/2025   | 5 Payee name<br>Golden Peak Strategies   |  |
| 6 Amount (\$)<br>\$7,344.50                                  | 7 Payee address; City; State; Zip Code<br>PO Box 5930<br><br>Vail, CO 81658                        |  |
| 8 PURPOSE OF EXPENDITURE                                     | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense            | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Direct Mail |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  |  |
| Date<br>04/23/2025   | Candidate/Officeholder name  | Office sought Office held  |
| Payee name<br>Golden Peak Strategies                         |  |  |
| Amount (\$)<br>\$7,344.50                                    | Payee address; City; State; Zip Code<br>PO Box 5930<br><br>Vail, CO 81658                          |  |
| PURPOSE OF EXPENDITURE                                       | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense            | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Direct Mail |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  |  |
| Date<br>04/02/2025   | Candidate/Officeholder name  | Office sought Office held  |
| Payee name<br>Google   |  |  |
| Amount (\$)<br>\$30.70                                       | Payee address; City; State; Zip Code<br>501 Ellis St<br><br>Mountain View, CA 94043                |  |
| PURPOSE OF EXPENDITURE                                       | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Hosting     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  |  |
|  |  |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services  
Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract 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:<br>Sch: 7/9 Rpt: 29/32     |  | 2 FILER NAME<br>Beck, Elizabeth  |  | 3 Filer ID  |  |
| 4 Date<br>04/02/2025                                  |  | 5 Payee name<br>Google   |  |   |  |
| 6 Amount (\$)<br>\$14.15                              |  | 7 Payee address; City; State; Zip Code<br>501 Ellis St<br><br>Mountain View, CA 94043              |  |   |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Hosting              |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>03/27/2025                                    |  | Payee name<br>Grandmas   |  |   |  |
| Amount (\$)<br>\$66.72                                |  | Payee address; City; State; Zip Code<br>715 W Magnolia Ave<br><br>Fort Worth, TX 76104             |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meeting              |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>04/04/2025                                    |  | Payee name<br>Grandmas   |  |   |  |
| Amount (\$)<br>\$501.91                               |  | Payee address; City; State; Zip Code<br>715 W Magnolia Ave<br><br>Fort Worth, TX 76104             |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                  |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Event Food and Drink |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## 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  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract 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:<br>Sch: 8/9 Rpt: 30/32            | 2 FILER NAME<br>Beck, Elizabeth   | 3 Filer ID   |
| 4 Date<br>04/08/2025   | 5 Payee name<br>IMedia Industries   |  |
| 6 Amount (\$)<br>\$20,000.00                                 | 7 Payee address; City; State; Zip Code<br>208 Verrado Path<br><br>Austin, TX 78748                    |  |
| 8 PURPOSE OF EXPENDITURE                                     | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense               | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Digital Ads |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |  |
| Date<br>04/10/2025   | Candidate/Officeholder name<br>Payee name<br>Nuckles Media Partners                                   | Office sought<br>Office held   |
| Amount (\$)<br>\$20,000.00                                   | Payee address; City; State; Zip Code<br>1100 New Jersey Ave SE, Suite 108<br><br>Washington, DC 20003 |  |
| PURPOSE OF EXPENDITURE                                       | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense               | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Digital Ads |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |   |  |
| Date<br>04/01/2025   | Candidate/Officeholder name<br>Payee name<br>Orta, Rob  | Office sought<br>Office held   |
| Amount (\$)<br>\$2,500.00                                    | Payee address; City; State; Zip Code<br>PO Box 15707<br><br>Austin, TX 78761                          |  |
| PURPOSE OF EXPENDITURE                                       | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor     | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Payroll     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract 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:<br>Sch: 9/9 Rpt: 31/32            | 2 FILER NAME<br>Beck, Elizabeth   | 3 Filer ID   |
| 4 Date<br>04/15/2025   | 5 Payee name<br>Orta, Rob   |  |
| 6 Amount (\$)<br>\$2,500.00                                  | 7 Payee address; City; State; Zip Code<br>PO Box 15707<br><br>Austin, TX 78761                    |  |
| 8 PURPOSE OF EXPENDITURE                                     | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Payroll |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought      Office held   |

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:  
Sch: 1/1 Rpt: 32/32

2 FILER NAME

Beck, Elizabeth

3 Filer ID

4 Date

04/08/2025

5 Name of person from whom amount is received

IMedia Industries

8 Amount (\$)

\$19,950.00

6 Address of person from whom amount is received; City; State; Zip Code

208 Verrado Path

Fort Worth, TX 78748

7 Purpose for which amount is received

Returned Wire

☐ Check if political contribution returned to filer