

**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:

38

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

Elizabeth

NICKNAME

LAST

SUFFIX

Beck

OFFICE USE ONLY

Date Received

CSO REC'D
JAN 16 '24 PM4:19

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY;

ZIP CODE

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

☐ Change of Address

5 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Mrs.

Eva

Sandoval

NICKNAME

LAST

SUFFIX

Bonilla

6 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

362 Foch St

Fort Worth

TX 76107

(Residence or Business)

7 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

817

360-1256

8 REPORT
TYPE

☒ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign treasurer
appointment (officeholder only)

☐ July 15

☐ 8th day before election

☐ Exceeded modified
reporting limit

☐ Final Report (Attach C/OH-FR)

9 PERIOD
COVERED

Month Day Year

07/01/2023

THROUGH

Month Day Year

12/31/2023

10 ELECTION

ELECTION DATE

Month Day Year

☐ Primary

ELECTION TYPE

☐ Runoff

☐ Other

☐ General

☐ Special

11 OFFICE

OFFICE HELD (if any)

Fort Worth City Council District 9

12 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

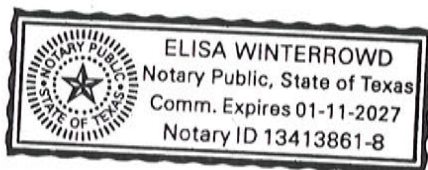
FORM C/OH
COVER SHEET PG 2

2 of 38

13 C / OH NAME Beck, Elizabeth		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S) <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		
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS	
		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)	\$ 7,518.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 18,598.15
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 20,948.83
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.



AFFIX NOTARY STAMP / SEAL ABOVE

Elizabeth M Beck
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Elizabeth M. Beck, this the 16th day of January, 2024, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering

Elisa Winterrowd
Printed name of officer administering

Sr. Admin. Assistant
Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

3 of 38

18 FILER NAME Beck, Elizabeth		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,518.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
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	\$ 18,598.15
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 type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/21 Rpt: 4/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 09/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APPLEWHITE, Ronald 6 Contributor address; City; State; Zip Code 7408 Lemonwood Lane Fort Worth, TX 76133	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arroyo, Guadalupe Contributor address; City; State; Zip Code 2363 Floyd Hampton Road Crowley, TX 76036	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Aircraft Maintenance Technician		Employer (See Instructions) American Airlines
Date 08/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Joyce L. Contributor address; City; State; Zip Code 4751 Grapevine Terrace Fort Worth, TX 76123	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Instructor		Employer (See Instructions) TCU Extended Education
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belknap, John Contributor address; City; State; Zip Code 2944 James Avenue Fort Worth, TX 76110	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) John Belknap
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigvand, Zagros Contributor address; City; State; Zip Code PO BOX #224767 Dallas, TX 75222	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self-employed		Employer (See Instructions) Zagros Bigvand

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/21 Rpt: 5/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigvand, Zagros 6 Contributor address; City; State; Zip Code PO BOX #224767 Dallas, TX 75222	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Self-employed		9 Employer (See Instructions) Zagros Bigvand
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Jill Contributor address; City; State; Zip Code 2031 Ward Pkwy Fort Worth, TX 76110-1709	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Witcher Properties Ltd
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bock, Michele Contributor address; City; State; Zip Code P.O. Box 102034 Fort Worth, TX 76185	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jeffrey Grant Contributor address; City; State; Zip Code 221 North LaSalle Street Chicago, IL 60601	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Yes u asked		Employer (See Instructions) Uh huh
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULEBRO, KATHLEEN A Contributor address; City; State; Zip Code 3850 Washburn Avenue Fort Worth, TX 76107	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Artistic Director		Employer (See Instructions) Amphibian Stage

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/21 Rpt: 6/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 07/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canahuati, Judy 6 Contributor address; City; State; Zip Code 6258 Soft Shade Way Columbia, MD 21045	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) technical advisor		9 Employer (See Instructions) USAID
Date 08/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canahuati, Judy Contributor address; City; State; Zip Code 6258 Soft Shade Way Columbia, MD 21045	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) technical advisor		Employer (See Instructions) USAID
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canahuati, Judy Contributor address; City; State; Zip Code 6258 Soft Shade Way Columbia, MD 21045	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) technical advisor		Employer (See Instructions) USAID
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canahuati, Judy Contributor address; City; State; Zip Code 6258 Soft Shade Way Columbia, MD 21045	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) technical advisor		Employer (See Instructions) USAID
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chalk, John Contributor address; City; State; Zip Code 301 Commerce Street Fort Worth, TX 76102	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Whitaker Chalk

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/21 Rpt: 7/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 09/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian, Ann 6 Contributor address; City; State; Zip Code 3112 Preston Hollow Road Fort Worth, TX 76109	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Key School Ft Worth
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Zoe Contributor address; City; State; Zip Code 912 Raven Ct Southlake, TX 76092	Amount of Contribution (\$) \$41.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Zoe Courtney
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crotty, Barbara Contributor address; City; State; Zip Code 2201 Washington Ave Fort Worth, TX 76110	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) UTHealth
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crum, Elisabeth Contributor address; City; State; Zip Code 2524 Greene Avenue Fort Worth, TX 76109	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Crum Art
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culebro, Kathleen Contributor address; City; State; Zip Code 120 S. Main Street Fort Worth, TX 76107	Amount of Contribution (\$) \$41.00
Principal occupation / Job title (See Instructions) Artistic Director		Employer (See Instructions) Amphibian Stage

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/21 Rpt: 8/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Bronson 6 Contributor address; City; State; Zip Code 5755 Clearfork Main Street apt 1501 Fort Worth, TX 76109	7 Amount of Contribution (\$) \$41.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, John Contributor address; City; State; Zip Code 3216 rogers ave fort worth, TX 76109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, John Contributor address; City; State; Zip Code 3216 rogers ave fort worth, TX 76109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doss, Aaron Contributor address; City; State; Zip Code 2260 Fifth Ave Fort Worth, TX 76110	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Ritchie Bros
Date 07/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dreyfus, Charles Contributor address; City; State; Zip Code 2416 Park Place Ave Fort Worth, TX 76110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/21 Rpt: 9/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 07/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dreyfus, Charles 6 Contributor address; City; State; Zip Code 2416 Park Place Ave Fort Worth, TX 76110	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dreyfus, Charles Contributor address; City; State; Zip Code 2416 Park Place Ave Fort Worth, TX 76110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dreyfus, Charles Contributor address; City; State; Zip Code 2416 Park Place Ave Fort Worth, TX 76110	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dreyfus, Charles Contributor address; City; State; Zip Code 2416 Park Place Ave Fort Worth, TX 76110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dreyfus, Charles Contributor address; City; State; Zip Code 2416 Park Place Ave Fort Worth, TX 76110	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 7/21 Rpt: 10/38

2 FILER NAME

Beck, Elizabeth

3 Filer ID

4 Date

10/15/2023

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dreyfus, Charles

7 Amount of Contribution (\$)

\$25.00

6 Contributor address; City; State; Zip Code

2416 Park Place Ave

Fort Worth, TX 76110

8 Principal occupation / Job title (See Instructions)

Not Employed

9 Employer (See Instructions)

Not Employed

Date

10/24/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dreyfus, Charles

Amount of Contribution (\$)

\$15.00

Contributor address; City; State; Zip Code

2416 Park Place Ave

Fort Worth, TX 76110

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Not Employed

Date

11/15/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dreyfus, Charles

Amount of Contribution (\$)

\$25.00

Contributor address; City; State; Zip Code

2416 Park Place Ave

Fort Worth, TX 76110

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Not Employed

Date

11/24/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dreyfus, Charles

Amount of Contribution (\$)

\$15.00

Contributor address; City; State; Zip Code

2416 Park Place Ave

Fort Worth, TX 76110

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Not Employed

Date

12/21/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dreyfus, Charles

Amount of Contribution (\$)

\$25.00

Contributor address; City; State; Zip Code

2416 Park Place Ave

Fort Worth, TX 76110

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/21 Rpt: 11/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 11/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyson, Maynard 6 Contributor address; City; State; Zip Code 2329 Mistletoe Ave Fort Worth, TX 76110	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) IRB board member		9 Employer (See Instructions) ADVARRA
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyson, Maynard Contributor address; City; State; Zip Code 2329 Mistletoe Ave Fort Worth, TX 76110	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) IRB board member		Employer (See Instructions) ADVARRA
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feit, Rachel Contributor address; City; State; Zip Code 1800 6TH AVENUE FORT WORTH, TX 76110	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Deloitte
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzgerald, Nancy Contributor address; City; State; Zip Code 701 E Bluff St. #6407 Fort Worth, TX 76102	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Kathleen Contributor address; City; State; Zip Code 1116 West Arlington Avenue Fort Worth, TX 76110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 9/21 Rpt: 12/38

2 FILER NAME

Beck, Elizabeth

3 Filer ID

4 Date
10/19/2023

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Freer, Jill

7 Amount of Contribution (\$)

\$25.00

6 Contributor address; City; State; Zip Code
2916 Merrimac St
Fort Worth, TX 76107

8 Principal occupation / Job title (See Instructions)
Retired

9 Employer (See Instructions)
Retired

Date
11/19/2023

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Freer, Jill

Amount of Contribution (\$)

\$25.00

Contributor address; City; State; Zip Code
2916 Merrimac St
Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date
12/19/2023

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Freer, Jill

Amount of Contribution (\$)

\$25.00

Contributor address; City; State; Zip Code
2916 Merrimac St
Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date
12/23/2023

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Freer, Jill

Amount of Contribution (\$)

\$20.00

Contributor address; City; State; Zip Code
2916 Merrimac St
Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date
12/30/2023

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Hedden, Julia

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code
3300 Worth Hills Dr
Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)
teacher

Employer (See Instructions)
FWISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/21 Rpt: 13/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holloway, Robert	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code 6715 Trail Cliff Way Fort Worth, TX 76132-3064	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isgur, Benjamin	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 2504 Sandage Ave Fort Worth, TX 76109	
Principal occupation / Job title (See Instructions) Health research		Employer (See Instructions) Fidelity Investments
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff, Brown	Amount of Contribution (\$) \$41.00
	Contributor address; City; State; Zip Code 1239 S Plymouth Ct Chicago, IL 60605	
Principal occupation / Job title (See Instructions) YOU TRIED		Employer (See Instructions) SAME
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff, Brown	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code 1239 S Plymouth Ct Chicago, IL 60605	
Principal occupation / Job title (See Instructions) YOU TRIED		Employer (See Instructions) SAME
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justin, Perry	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 1720 Alston Ave Fort Worth, TX 76110	
Principal occupation / Job title (See Instructions) Welder		Employer (See Instructions) Southwestern Equipment Co.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/21 Rpt: 14/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kazda, Michael	7 Amount of Contribution (\$) \$41.00
	6 Contributor address; City; State; Zip Code P.O. Box 703 Hillsboro, TX 76646	
8 Principal occupation / Job title (See Instructions) Sr. Management Analyst		9 Employer (See Instructions) Fort Worth FD
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Komatsu, Karl	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 3905 Lenox Dr Fort Worth, TX 76107	
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Komatsu Architecture
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampe, Mary Beth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 3909 Stonehenge Rd Fort Worth, TX 76109	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ledbetter, Denise	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 5433 Byers Ave Fort Worth, TX 76107	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Glenn	Amount of Contribution (\$) \$41.00
	Contributor address; City; State; Zip Code 5600 Rockhill Rd Fort Worth, TX 76113	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Linebarger Goggan Blair & Sampson

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/21 Rpt: 15/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linden, Gregory	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code 117 Maiden Lane Oakland, CA 94602	
8 Principal occupation / Job title (See Instructions) Researcher		9 Employer (See Instructions) UC Berkeley
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Look, Frances	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 1024 Lilac Fort Worth, TX 76110	
Principal occupation / Job title (See Instructions) Medicare Sales		Employer (See Instructions) MissMedicare101
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Look, Frances	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 1024 Lilac St Fort Worth, TX 76110	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Stephen	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 3904 Driskell Blvd. Fort Worth, TX 76107	
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Bailey & Galyen
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minker, Carol & Richard	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 2865 Manorwood Trail Fort Worth, TX 76109	
Principal occupation / Job title (See Instructions) travel consultat		Employer (See Instructions) Sanders Travel Centre

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/21 Rpt: 16/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minker, carol & richard 6 Contributor address; City; State; Zip Code 2865 Manorwood Trail Fort Worth, TX 76109	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) travel		9 Employer (See Instructions) Sanders Travel Centre
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Douglas D Contributor address; City; State; Zip Code PO Box 404 Northampton, MA 01061	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nixon, Charles Contributor address; City; State; Zip Code 3560 Manderly Place Fort Worth, TX 76109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Connell, Jennifer Contributor address; City; State; Zip Code 2937 5th Ave Fort Worth, TX 76110	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Trust Officer		Employer (See Instructions) Argent Trust
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pavlik, Linda Contributor address; City; State; Zip Code 1200 Summit #770 Fort Worth, TX 76102	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) communications		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/21 Rpt: 17/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Mario	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 2744 5th Ave Fort Worth, TX 76110	
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) self
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pevoto, Rod	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 5412 Appalachian Way Fort Worth, TX 76123	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Platt, Melvin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code 11230 leachman circle Dallas, TX 75229	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raines, Jeremy	Amount of Contribution (\$) \$41.00
	Contributor address; City; State; Zip Code 2313 Ashland Ave Fort Worth, TX 76107	
Principal occupation / Job title (See Instructions) VP Operations		Employer (See Instructions) RMP Industrial Supply Inc.
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rix, Allison	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 6359 Greenway Road Fort Worth, TX 76116	
Principal occupation / Job title (See Instructions) Recruiter		Employer (See Instructions) Allison Rix Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/21 Rpt: 18/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 12/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, William	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 6251 Stevenson Oaks Dr Apt 2117 Fort Worth, TX 76123-2775	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slattery, James	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2223 Waterloo City Lane Apt 146 Austin, TX 78741	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slattery, James	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2223 Waterloo City Lane Apt 146 Austin, TX 78741	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slattery, James	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2223 Waterloo City Lane Apt 146 Austin, TX 78741	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slattery, James	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2223 Waterloo City Lane Apt 146 Austin, TX 78741	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/21 Rpt: 19/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 11/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slattery, James	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code 2223 Waterloo City Lane Apt 146 Austin, TX 78741	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slattery, James	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2223 Waterloo City Lane Apt 146 Austin, TX 78741	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smart, Samuel	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 1121 Clara St. Fort Worth, TX 76110	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jack	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code 3832 Cresthill Rd. Benbrook, TX 76116	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spangler, Tony	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 2717 Ryan Place Drive Fort Worth, TX 76110	
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) The Starr Conspiracy

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 17/21 Rpt: 20/38

2 FILER NAME

Beck, Elizabeth

3 Filer ID

4 Date

11/04/2023

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Spicer, Kathy

7 Amount of Contribution (\$)

\$250.00

6 Contributor address; City; State; Zip Code

6038 Lovell Ave

Fort Worth, TX 76116-4612

8 Principal occupation / Job title (See Instructions)

Not Employed

9 Employer (See Instructions)

Not Employed

Date

11/22/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Stadler, Graham

Amount of Contribution (\$)

\$1,000.00

Contributor address; City; State; Zip Code

2610 Greene Ave.

Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Operations

Employer (See Instructions)

Wendy Davis Campaign

Date

11/28/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

T. York, Terrell

Amount of Contribution (\$)

\$50.00

Contributor address; City; State; Zip Code

3500 River Oaks Drive

New Orleans, LA 70131

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Not Employed

Date

12/20/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

T. York, Terrell

Amount of Contribution (\$)

\$25.00

Contributor address; City; State; Zip Code

3500 River Oaks Drive

New Orleans, LA 70131

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Not Employed

Date

11/28/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Thistlethwaite, Randall

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

2028 Wilshire Blvd

Fort Worth, TX 76110

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/21 Rpt: 21/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Rick	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code 2517 Ryan Ave Fort Worth, TX 76110	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderpool, Guy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 2513 Yucca Avenue Fort Worth, TX 76111	
Principal occupation / Job title (See Instructions) Museum		Employer (See Instructions) Amon Carter Museum of American Art
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voigt, Christine	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2615 5th Avenue Fort Worth, TX 76110	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT JR, BENJAMIN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code 8341 Summer Park Dr Fort Worth, TX 76123-1991	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace Bronstein, Dale	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code 7700 Meadowbrook Drive Fort Worth, TX 76112	
Principal occupation / Job title (See Instructions) Wine Merchant		Employer (See Instructions) First National Wine & Spirits

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 19/21 Rpt: 22/38

2 FILER NAME

Beck, Elizabeth

3 Filer ID

4 Date
08/22/2023

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Weeks Reyes, Cynthia

7 Amount of Contribution (\$)

\$41.00

6 Contributor address; City; State; Zip Code
11000 Live Oak Creek Dr
Fort Worth, TX 76108

8 Principal occupation / Job title (See Instructions)
RN

9 Employer (See Instructions)
Medical City Fort Worth

Date
11/30/2023

Full name of contributor ☐ out-of-state PAC (ID#: _____)
West, Britt

Amount of Contribution (\$)

\$15.00

Contributor address; City; State; Zip Code
6316 Klamath Rd
Fort Worth, TX 76116-1618

Principal occupation / Job title (See Instructions)
Not Employed

Employer (See Instructions)
Not Employed

Date
11/12/2023

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Westbrooks, Nathaniel

Amount of Contribution (\$)

\$5.00

Contributor address; City; State; Zip Code
1513 East Presidio
Fort Worth, TX 76102

Principal occupation / Job title (See Instructions)
VWest International LLC

Employer (See Instructions)
Owner

Date
09/30/2023

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Wheeler, Don

Amount of Contribution (\$)

\$200.00

Contributor address; City; State; Zip Code
PO Box470865
Fort Worth, TX 76147

Principal occupation / Job title (See Instructions)
Landscape Architect

Employer (See Instructions)
Self

Date
11/30/2023

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Wheeler, Don

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code
PO Box470865
Fort Worth, TX 76147

Principal occupation / Job title (See Instructions)
Landscape Architect

Employer (See Instructions)
Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/21 Rpt: 23/38
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitton, Jim	7 Amount of Contribution (\$) \$41.00
	6 Contributor address; City; State; Zip Code 4215 Warnock Court Fort Worth, TX 76109	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Brackett & Ellis
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitton, Jim	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 4215 Warnock Court fort worth tx 76109 Fort Worth, TX 76109	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Brackett & Ellis P.C.
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitton, Jim	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 4215 Warnock Court fort worth tx 76109 Fort Worth, TX 76109	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Brackett & Ellis P.C.
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) johnson, barry	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 3401 Lawndale ave Fort Worth, TX 76133	
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) self
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) minker, carol & richard	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 2865 Manorwood trail Fort Worth, TX 76109	
Principal occupation / Job title (See Instructions) travel agent		Employer (See Instructions) sanders travel

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 21/21 Rpt: 24/38

2 FILER NAME
Beck, Elizabeth

3 Filer ID

4 Date
11/28/2023

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
phillips, greg

7 Amount of Contribution (\$)
\$250.00

6 Contributor address; City; State; Zip Code
724 pennsylvania avenue
fort worth, TX 76104

8 Principal occupation / Job title (See Instructions)
physician

9 Employer (See Instructions)
self

Date
09/30/2023

Full name of contributor ☐ out-of-state PAC (ID#: _____)
spicer, Kathy

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
6038 Lovell Ave
Fort Worth, TX 76116-4612

Principal occupation / Job title (See Instructions)
Not Employed

Employer (See Instructions)
Not Employed

Date
12/22/2023

Full name of contributor ☐ out-of-state PAC (ID#: _____)
watkins, doris

Amount of Contribution (\$)
\$5.00

Contributor address; City; State; Zip Code
2237 Hawthorne
Fort worth, TX 76110

Principal occupation / Job title (See Instructions)
Not Employed

Employer (See Instructions)
Not Employed

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: Sch: 1/14 Rpt: 25/38	2 FILER NAME Beck, Elizabeth	3 Filer ID
4 Date 07/07/2023	5 Payee name ActBlue	
6 Amount (\$) \$3.24	7 Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/03/2023	Payee name ActBlue	
Amount (\$) \$1.59	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2023	Payee name ActBlue	
Amount (\$) \$16.87	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
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: Sch: 2/14 Rpt: 26/38		2 FILER NAME Beck, Elizabeth		3 Filer ID	
4 Date 10/05/2023		5 Payee name ActBlue			
6 Amount (\$) \$8.61		7 Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/03/2023		Payee name ActBlue			
Amount (\$) \$6.10		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/04/2023		Payee name ActBlue			
Amount (\$) \$51.20		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
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: Sch: 3/14 Rpt: 27/38	2 FILER NAME Beck, Elizabeth	3 Filer ID
4 Date 09/05/2023	5 Payee name Bank of America	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code PO Box 15284 Wilmington, DE 19850	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/05/2023	Candidate/Officeholder name	Office sought
Amount (\$) \$50.00	Payee name Bank of America	Office held
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/03/2023	Candidate/Officeholder name	Office sought
Amount (\$) \$22.01	Payee name Bank of America	Office held
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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: Sch: 4/14 Rpt: 28/38	2 FILER NAME Beck, Elizabeth	3 Filer ID
4 Date 08/02/2023	5 Payee name Bank of America	
6 Amount (\$) \$22.01	7 Payee address; City; State; Zip Code PO Box 15284 Wilmington, DE 19850	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2023	Payee name Bank of America	
Amount (\$) \$22.01	Payee address; City; State; Zip Code PO Box 15284 Wilmington, DE 19850	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2023	Payee name Bank of America	
Amount (\$) \$145.42	Payee address; City; State; Zip Code PO Box 15284 Wilmington, DE 19850	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 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: Sch: 5/14 Rpt: 29/38	2 FILER NAME Beck, Elizabeth	3 Filer ID
4 Date 11/02/2023	5 Payee name Bank of America	
6 Amount (\$) \$25.69	7 Payee address; City; State; Zip Code PO Box 15284 Wilmington, DE 19850	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name Bank of America	
Amount (\$) \$25.69	Payee address; City; State; Zip Code PO Box 15284 Wilmington, DE 19850	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/17/2023	Payee name Blue Victory Communications	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code PO Box 300625 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email/Media Consulting
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: Sch: 6/14 Rpt: 30/38	2 FILER NAME Beck, Elizabeth	3 Filer ID
4 Date 10/17/2023	5 Payee name Blue Victory Communications	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code PO Box 300625 Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email/Media Consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name Blue Victory Communications	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code PO Box 300625 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email/Media Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name Blue Victory Communications	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 300625 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email/Media Consulting
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: Sch: 7/14 Rpt: 31/38		2 FILER NAME Beck, Elizabeth		3 Filer ID	
4 Date 07/03/2023		5 Payee name Costco			
6 Amount (\$) \$123.53		7 Payee address; City; State; Zip Code 5300 Overton Ridge Blvd Fort Worth, TX 76132			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Community Event Supplies	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/01/2023		Payee name Google			
Amount (\$) \$25.58		Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/05/2023		Payee name Google			
Amount (\$) \$25.58		Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting	
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: Sch: 8/14 Rpt: 32/38		2 FILER NAME Beck, Elizabeth		3 Filer ID	
4 Date 12/04/2023		5 Payee name Google			
6 Amount (\$) \$25.58		7 Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 07/03/2023		Candidate/Officeholder name Payee name Google			
Amount (\$) \$14.51		Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 08/02/2023		Candidate/Officeholder name Payee name Google			
Amount (\$) \$14.51		Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 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: Sch: 9/14 Rpt: 33/38		2 FILER NAME Beck, Elizabeth		3 Filer ID	
4 Date 09/05/2023		5 Payee name Google			
6 Amount (\$) \$14.54		7 Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/02/2023		Payee name Google			
Amount (\$) \$14.53		Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/02/2023		Payee name Google			
Amount (\$) \$13.99		Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting	
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: Sch: 10/14 Rpt: 34/38		2 FILER NAME Beck, Elizabeth		3 Filer ID	
4 Date 12/04/2023		5 Payee name Google			
6 Amount (\$) \$13.99		7 Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/02/2023		Payee name Google			
Amount (\$) \$25.58		Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/03/2023		Payee name Google			
Amount (\$) \$25.58		Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting	
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: Sch: 11/14 Rpt: 35/38	2 FILER NAME Beck, Elizabeth	3 Filer ID
4 Date 10/02/2023	5 Payee name Google	
6 Amount (\$) \$25.58	7 Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2023	Payee name IMedia Industries	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 208 Verrado Path Austin, TX 78748	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Media Refund
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/09/2023	Payee name Lone Star Project	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 6 e street se washington, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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: Sch: 12/14 Rpt: 36/38	2 FILER NAME Beck, Elizabeth	3 Filer ID
4 Date 07/17/2023	5 Payee name NGP VAN	
6 Amount (\$) \$1,215.24	7 Payee address; City; State; Zip Code 655 15th St NW Washington, DC 20005	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/03/2023	Payee name NGP VAN	
Amount (\$) \$1,215.24	Payee address; City; State; Zip Code 655 15th St NW Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/13/2023	Payee name NGP VAN	
Amount (\$) \$1,215.24	Payee address; City; State; Zip Code 655 15th St NW Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database
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: Sch: 13/14 Rpt: 37/38	2 FILER NAME Beck, Elizabeth	3 Filer ID
4 Date 08/10/2023	5 Payee name Tarrant County Democratic Party	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 685 John B. Sias Memorial Pkwy Suite 400 Fort Worth, TX 76134	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/11/2023	Candidate/Officeholder name Payee name Vantiv	Office sought Office held
Amount (\$) \$8.02	Payee address; City; State; Zip Code 8500 Governor's Hill Drive, Symmes Township Cincinnati, OH 45249	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/11/2023	Candidate/Officeholder name Payee name Vantiv	Office sought Office held
Amount (\$) \$36.13	Payee address; City; State; Zip Code 8500 Governor's Hill Drive, Symmes Township Cincinnati, OH 45249	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
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: Sch: 14/14 Rpt: 38/38		2 FILER NAME Beck, Elizabeth		3 Filer ID	
4 Date 10/11/2023		5 Payee name Vantiv			
6 Amount (\$) \$20.61		7 Payee address; City; State; Zip Code 8500 Governor's Hill Drive, Symmes Township Cincinnati, OH 45249			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/11/2023		Payee name Vantiv			
Amount (\$) \$74.15		Payee address; City; State; Zip Code 8500 Governor's Hill Drive, Symmes Township Cincinnati, OH 45249			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	