

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 (Ethics Commission Filers)

2 Total pages filed:

10

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Deborah W.
PEOPLES

OFFICE USE ONLY

Date Received

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

☐ Change of Address

CSO REC'D
JUL 15 '26 PM 12:02

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

()

Date Hand-delivered or Date Postmarked

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

OPAL
Lee

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS

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

CITY;

STATE;

ZIP CODE

(Residence or Business)

940 E. Annie St.

FT. WORTH

TX

76104

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

()

9 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)

10 PERIOD
COVERED

Month

Day

Year

Month

Day

Year

1 / 1 / 26

THROUGH

6 / 30 / 26

11 ELECTION

ELECTION DATE

Month

Day

Year

/ /

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other
Description

☐ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

Council District 5

13 OFFICE SOUGHT (if known)

14 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

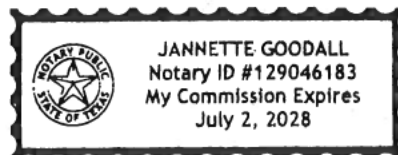
15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 19,394.
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,500 ⁰⁰
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 27,527 ⁰⁰
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Deborah W. Peoples
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Deborah Peoples this the 15 day of July, 2026, to certify which, witness my hand and seal of office.

Jannette Goodall Jannette Goodall Notary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 19,394.20
2.	☒ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 9,063.39
3.	☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	☐ SCHEDULE E: LOANS	\$
5.	☒ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2500.00
6.	☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	☐ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	☐ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5
2 FILER NAME <i>Duborn Peoples</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3-23-26</i>	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) <i>MARY KAY NUGHER</i>	7 Amount of contribution (\$) <i>100.00</i>
6 Contributor address; City; State; Zip Code <i>3408 View FTW TX 76103</i>		
8 Principal occupation / Job title (See Instructions) <i>RETIRED</i>		9 Employer (See Instructions) <i>RETIRED</i>
Date <i>3-23-26</i>	Full name of contributor ☐ out-of-state PAC (ID#: _____) <i>WILLIS JOHNSON</i>	Amount of contribution (\$) <i>500.00</i>
Contributor address; City; State; Zip Code <i>1001 Belleview #1001 DLS, TX 75215</i>		
Principal occupation / Job title (See Instructions) <i>CONTRACTOR</i>		Employer (See Instructions) <i>SELF</i>
Date <i>3-23-26</i>	Full name of contributor ☐ out-of-state PAC (ID#: _____) <i>RDG C BROOKS</i>	Amount of contribution (\$) <i>500.00</i>
Contributor address; City; State; Zip Code <i>5032 Highland MEADOW DR FTW TX 76132</i>		
Principal occupation / Job title (See Instructions) <i>CONSULTANT</i>		Employer (See Instructions) <i>SELF</i>
Date <i>3-23-26</i>	Full name of contributor ☐ out-of-state PAC (ID#: _____) <i>PRESTON GEREM</i>	Amount of contribution (\$) <i>1000.00</i>
Contributor address; City; State; Zip Code <i>1200 WASHINGTON FT WORTH TX 76107 TEX.</i>		
Principal occupation / Job title (See Instructions) <i>PRESIDENT</i>		Employer (See Instructions) <i>SID W. RICHARTSON FOUNDATION</i>
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5
2 FILER NAME Deborah Peoples		3 Filer ID (Ethics Commission Filers)
4 Date 3-23-26	5 Full name of contributor ☐ out-of-state PAC (ID#: RAMON ROMERO JR. 6 Contributor address; City; State; Zip Code 3320 View ST Ft. Worth TX 76103	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions) CONTRACTOR		9 Employer (See Instructions) SELF.
Date 3-23-26	Full name of contributor ☐ out-of-state PAC (ID#: CELINA LASQUEZ Contributor address; City; State; Zip Code 2619 CREEKVIEW DR Deltona FL 32716	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions) DIST DIRECTOR		Employer (See Instructions) CITY OF FT. W.
Date 3-23-26	Full name of contributor ☐ out-of-state PAC (ID#: ALISON CAMPBELL Contributor address; City; State; Zip Code	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) MANAGER.		Employer (See Instructions) ALCON LABORATORIES.
Date 3-23-26	Full name of contributor ☐ out-of-state PAC (ID#: VERA A. ROBERTS Contributor address; City; State; Zip Code 2249 SIMS DR. FTW TX 76114	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3
2 FILER NAME Deborah Peoples		3 Filer ID (Ethics Commission Filers)
4 Date 3-23-26	5 Full name of contributor CHARLES EDMUNDS ☐ out-of-state PAC (ID# _____) 6 Contributor address; City; State; Zip Code 721 GREEN RIVER RD FTW TX 76103	7 Amount of contribution (\$) 5000
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 3-23-26	Full name of contributor SHARON DOUGLAS ☐ out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code 6502 WATSON HILL ARLINGTON TX 76002 CT.	Amount of contribution (\$) 50000
Principal occupation / Job title (See Instructions) Contractor CEO/OWNER		Employer (See Instructions) POTERE CONSTRUCTION LLC.
Date 3-23-26	Full name of contributor JOHN BARNETT ☐ out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code 3701 BLACK CANYON RD. FTW. TX 76109	Amount of contribution (\$) 50000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3-23-26	Full name of contributor RICKY L. HOWARD ☐ out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code 3010 UPLAND HUNTSFIELD TX 76063	Amount of contribution (\$) 250000
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) LOCKHEED MARTIN
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5
2 FILER NAME Deborah Peoples.		3 Filer ID (Ethics Commission Filers)
4 Date 3-23-26	5 Full name of contributor ☐ out-of-state PAC (ID#: LINDBERGER GOGGIN BLAIR SIMPSON LLC 6 Contributor address; City; State; Zip Code P.O. BOX 17420 AUSTIN TX 78760	7 Amount of contribution (\$) 2500.00
8 Principal occupation / Job title (See Instructions) ATTORNEYS.		9 Employer (See Instructions) SELF.
Date 3-23-26	Full name of contributor ☐ out-of-state PAC (ID#: FTW. FIREFIGHTERS FOR R. SPANZIBLE GOVT Contributor address; City; State; Zip Code 3855 TULSA WAY FTW. TX 76107	Amount of contribution (\$) 5000.00
Principal occupation / Job title (See Instructions) FIRE FIGHTERS.		Employer (See Instructions) NA.
Date 3-23-26	Full name of contributor ☐ out-of-state PAC (ID#: FOR THE CHILDREN PDC. Contributor address; City; State; Zip Code P.O. BOX 159 FTW. TX 76102	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) NA
Date	Full name of contributor ☐ out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

Date	Amount	Donor Name	Donor Address Line 1	Donor City	Donor State	Donor ZIP	Donor Occupation
1/2/26	10 Sharon	Burkley	5620 Norris St.	Fort Worth	TX	76119	Community Development Manager
1/12/26	7 Zeena	Regis	1503 Dancing Fox Rd. ,	Decatur	GA	30032	Chaplain
1/24/26	7 Jo	Rowls	109 Crossroads Circle	Westworth Village	TX	76114	Not Employed
1/27/26	10 Mervil	Johnson	1511 Oakland blvd	Fort Worth	TX	76103	Manager
1/29/26	10 Sharon	Burkley	5620 Norris St.	Fort Worth	TX	76119	Community Development Manager
2/12/26	7 Zeena	Regis	1503 Dancing Fox Rd. ,	Decatur	GA	30032	Chaplain
2/24/26	7 Jo	Rowls	109 Crossroads Circle	Westworth Village	TX	76114	Not Employed
2/27/26	10 Mervil	Johnson	1511 Oakland blvd	Fort Worth	TX	76103	Manager
3/4/26	10 Sharon	Burkley	5620 Norris St.	Fort Worth	TX	76119	Community Development Manager
3/10/26	250 Trista	Allen	4701 Foxfire Way	Fort Worth	TX	76133-6120	Associate director
3/12/26	7 Zeena	Regis	1503 Dancing Fox Rd. ,	Decatur	GA	30032	Chaplain
3/13/26	100 Blake	Moorman	PO Box 3523	Fort Worth	TX	76113	Marketing
3/18/26	100 Eva	Bonilla	362 Foch St	Fort Worth	TX	76107	Not Employed
3/19/26	500 BC	Real Estate Group	10585 N. MacArthur Blvd	Irving	TX	75063	Construction
3/23/26	500 Richard	Roby III	6234 Skylark Circle	North Richland Hills	TX	76180	Not Employed
3/23/26	100 Glenda	Thompson	7413 arbor hill drive	fort worth	TX	76120	Not employed
3/23/26	25 Tiesa	Leggett	572 Keble Drive	Crowley	TX	76036	Not Employed
3/23/26	50 Grace	Alaman	508 Oakmont Lane N	Fort Worth	TX	76112	Not Employed
3/23/26	100 Tiffany	Burks	2400 Cornerstone Dr	Mansfield	TX	76063	Attorney
3/23/26	100 Crystal	Gayden	6815 Manhattan Boulevard	Fort Worth	TX	76120	Lawyer
3/23/26	500 Jason	Smith	612 8th Ave	Fort Worth	TX	76104	Attorney
3/23/26	500 Stacy	Merritt	425 pinson Road	Forney	TX	75216	Attorney
3/23/26	100 Roderick	Miles Jr	7437 Whisterwheel Way	Fort Worth	TX	76123	Commissioner
3/23/26	500 Michael	Brooks	4900 Gage Avenue, 126	Fort Worth	TX	76109	Physician
3/23/26	50 Daryl	Davis	9216 Vineyard Lane	Fort Worth	TX	76123	Executive
3/23/26	50 DR. MIA	HALL	4629 MAPLE HILL DRIVE	FORT WORTH	TX	76123	Public Education Executive
3/23/26	250 Nicole	Collier	308 Oakmont Ln n	Fort Worth	TX	76112	State Representative, House District 95
3/24/26	7 Jo	Rowls	109 Crossroads Circle	Westworth Village	TX	76114	Not Employed
3/24/26	50 Rix	Quinn	4212 Inwood Road	Fort Worth	TX	76109	Newspaper writer
3/26/26	100 Jared	Williams	6731 Trail Cliff Way	Fort Worth	TX	76132	Self
3/27/26	10 Mervil	Johnson	1511 Oakland blvd	Fort Worth	TX	76103	Manager
3/28/26	50 Charles F	Johnson	3824 South Drive	Fort Worth	TX	76109	Minister
3/29/26	50 Ruth	Baker	2744 South Jones Stree	Fort Worth	TX	76104	Not Employed
3/31/26	50 Ruth	Baker	2744 South Jones Stree	Fort Worth	TX	76104	Funeral Director
4/12/26	7 Zeena	Regis	1503 Dancing Fox Rd. ,	Decatur	GA	30032	Chaplain
4/24/26	7 Jo	Rowls	109 Crossroads Circle	Westworth Village	TX	76114	Not Employed
4/27/26	10 Mervil	Johnson	1511 Oakland blvd	Fort Worth	TX	76103	Manager
4/27/26	50 Ruth	Baker	2744 South Jones Stree	Fort Worth	TX	76104	Funeral Director
5/1/26	10 Sharon	Burkley	5620 Norris St.	Fort Worth	TX	76119	Community Development Manager
5/12/26	7 Zeena	Regis	1503 Dancing Fox Rd. ,	Decatur	GA	30032	Chaplain
5/24/26	7 Jo	Rowls	109 Crossroads Circle	Westworth Village	TX	76114	Not Employed
5/27/26	10 Mervil	Johnson	1511 Oakland blvd	Fort Worth	TX	76103	Manager
6/2/26	50 Ruth	Baker	2744 South Jones Stree	Fort Worth	TX	76104	Not Employed
6/2/26	50 Ruth	Baker	2744 South Jones Stree	Fort Worth	TX	76104	Funeral Director
6/12/26	7 Zeena	Regis	1503 Dancing Fox Rd. ,	Decatur	GA	30032	Chaplain
6/24/26	7 Jo	Rowls	109 Crossroads Circle	Westworth Village	TX	76114	Not Employed
6/26/26	10 Tom	Hallford	4209 Doe Creek Trail	Keller	TX	76244	Not employed
6/27/26	50 Ruth	Baker	2744 South Jones Stree	Fort Worth	TX	76104	Funeral Director
6/27/26	10 Mervil	Johnson	1511 Oakland blvd	Fort Worth	TX	76103	Manager
6/29/26	50 Ruth	Baker	2744 South Jones Stree	Fort Worth	TX	76104	Not Employed

4,519

585

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1	
2 FILER NAME Deborah Peoples		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 3-23-26	6 Full name of contributor ☐ out-of-state PAC (ID#: _____) ACCOUNTABLE GOVERNMENT FUND	8 Amount of Contribution \$ 9,0063.39.	9 In-kind contribution description EVENT EXPENSE
7 Contributor address; City; State; Zip Code 430 OLD FITZMAUGH #7 DRIPPING SPRING TX 78620		☐ 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)			

Date	Full name of contributor ☐ out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
Contributor address; City; State; Zip Code		☐ Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card 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: <i>1</i>		2 FILER NAME <i>DEBORAH Peoples</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>4-5-26</i>		5 Payee name <i>STUART CLEGG</i>			
6 Amount (\$) <i>250000</i>		7 Payee address: <i>4424 Inwood Rd</i>		City; <i>HW</i>	State; <i>TX</i>
				Zip Code <i>76129</i>	
		☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>consulting expense</i>		(b) Description <i>campaign consultant</i>		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
Payee address;		City;			
		State;			
		Zip Code			
		☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
Payee address;		City;			
		State;			
		Zip Code			
		☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
Payee address;		City;			
		State;			
		Zip Code			
		☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
Payee address;		City;			
		State;			
		Zip Code			
		☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
Payee address;		City;			
		State;			
		Zip Code			
		☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED