

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 21																
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mrs. Lisa A		OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged																
	NICKNAME LAST SUFFIX Alpe																		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7827 Brykerwoods Houston, TX 77055																		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 523-7878																		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Amy A																		
	NICKNAME LAST SUFFIX Cone																		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1207 S. Shepherd Dr. Houston TX 77019																		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 687-8076																		
9 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input type="checkbox"/> July 15</div> <div style="width: 50%;"><input checked="" type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded Modified Reporting Limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>																		
10 PERIOD COVERED	<div style="display: flex; justify-content: space-between;"> <div> Month Day Year 3 / 29 / 22 </div> <div>THROUGH</div> <div> Month Day Year 4 / 27 / 22 </div> </div>																		
11 ELECTION	<div style="display: flex;"> <div style="flex: 1;"> ELECTION DATE Month Day Year 5 / 7 / 22 </div> <div style="flex: 2;"> ELECTION TYPE <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General </div> <div> <input type="checkbox"/> Runoff <input type="checkbox"/> Special </div> <div> <input type="checkbox"/> Other Description </div> </div> </div> </div>																		
12 OFFICE	OFFICE HELD (if any)																		
	13 OFFICE SOUGHT (if known) SBISD Board of Trustees Position 5																		
14 NOTICE FROM POLITICAL COMMITTEE(S) Additional Pages	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.																		
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input checked="" type="checkbox"/> GENERAL</td> <td>FFOT PAC</td> </tr> <tr> <td></td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td>PO Box 341027 Austin, TX 78734</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>Cabell Hobbs</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> <tr> <td></td> <td>PO Box 341027 Austin, TX 78734</td> </tr> </table>			COMMITTEE TYPE	COMMITTEE NAME	<input checked="" type="checkbox"/> GENERAL	FFOT PAC		COMMITTEE ADDRESS		PO Box 341027 Austin, TX 78734		COMMITTEE CAMPAIGN TREASURER NAME		Cabell Hobbs		COMMITTEE CAMPAIGN TREASURER ADDRESS		PO Box 341027 Austin, TX 78734
COMMITTEE TYPE	COMMITTEE NAME																		
<input checked="" type="checkbox"/> GENERAL	FFOT PAC																		
	COMMITTEE ADDRESS																		
	PO Box 341027 Austin, TX 78734																		
	COMMITTEE CAMPAIGN TREASURER NAME																		
	Cabell Hobbs																		
	COMMITTEE CAMPAIGN TREASURER ADDRESS																		
	PO Box 341027 Austin, TX 78734																		

GO TO PAGE 2

RECEIVED
 APR 29 2022
 BY: Diane Dickens Revised 8/17/2020

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

Lisa Alpe

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)

\$ 855.00

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

\$ 32,186.78

**EXPENDITURE
TOTALS**

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$ 721.07

4. TOTAL POLITICAL EXPENDITURES

\$ 19,378.77

**CONTRIBUTION
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$ 6,040.22

**OUTSTANDING
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 0.00

18 SIGNATURE

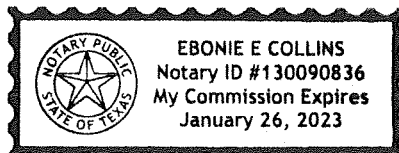
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information
required to be reported by me under Title 15, Election Code.

Lisa Andrews Alpe

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by LISA ANDREWS APE this the 29 day of APRIL,
20 22, to certify which, witness my hand and seal of office.

[Signature]

EBONIE E. COLLINS

NOTARY PUBLIC

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 Lisa Alpe		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,274.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 21,912.78
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 18,657.70
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

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: 7
2 FILER NAME Lisa Alpe		3 Filer ID (Ethics Commission Filers)
4 Date 03/30/2022	<div>5 Full name of contributor out-of-state PAC (ID#: _____) David Wersebe</div> <div>6 Contributor address; City; State; Zip Code 11922 Broken Bough Dr. Houston, TX77024</div>	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/31/2022	<div>Full name of contributor out-of-state PAC (ID#: _____) Emily Wells</div> <div>Contributor address; City; State; Zip Code 7615 Brykerwoods Houston, TX77055</div>	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/02/2022	<div>Full name of contributor out-of-state PAC (ID#: _____) Larry Baimbridge</div> <div>Contributor address; City; State; Zip Code 805 Dunleigh Meadows Ln. Houston, TX77055</div>	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/03/2022	<div>Full name of contributor out-of-state PAC (ID#: _____) Mace Meeks</div> <div>Contributor address; City; State; Zip Code 1215 Danbury Rd. Houston, TX77055</div>	Amount of contribution (\$) 500.00
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.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Lisa Alpe		3 Filer ID (Ethics Commission Filers)
4 Date 04/05/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Paul St. John 6 Contributor address; City; State; Zip Code 1103 W. 15th St. Houston, TX77008	7 Amount of contribution (\$) 150.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/08/2022	Full name of contributor out-of-state PAC (ID#: _____) Jessica Lammlein Contributor address; City; State; Zip Code 7711 Edgeway Dr. Houston, TX77024	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/09/2022	Full name of contributor out-of-state PAC (ID#: _____) Chris Johns Contributor address; City; State; Zip Code 10819 Everwood Lane Houston TX 77024	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2022	Full name of contributor out-of-state PAC (ID#: _____) Kevin McDonald Contributor address; City; State; Zip Code 1430 Cedarbrook Drive Houston TX 77055	Amount of contribution (\$) 250.00
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.		

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3 Filer ID (Ethics Commission Filers)

4 Date
04/11/2022

6 Contributor address; City; State; Zip Code
2619 Alan Lake Lane Spring TX 77388

7 Amount of contribution (\$)

250.00

9 Employer (See Instructions)

Full name of contributor out-of-state PAC (ID#:

Amount of contribution (\$)

04/11/2022

Contributor address; City; State; Zip Code

500.00

Employer (See Instructions)

Full name of contributor out-of-state PAC (ID#:

Amount of contribution (\$)

04/12/2022

Contributor address; City; State; Zip Code

200.00

Employer (See Instructions)

Full name of contributor _____ out-of-state PAC (ID#): _____

Amount of contribution (\$)

04/12/2022

Contributor address; City; State; Zip Code

100.00

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Lisa Alpe		3 Filer ID (Ethics Commission Filers)
4 Date 04/12/2022	5 Full name of contributor out-of-state PAC (ID#: Vicsandra Jones 6 Contributor address; City; State; Zip Code 5203 Pine Forest Rd. Houston TX 77056	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/13/2022	Full name of contributor out-of-state PAC (ID#: Jennifer Kruppa Contributor address; City; State; Zip Code 12 Village Oaks Ln Houston TX 77055	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/14/2022	Full name of contributor out-of-state PAC (ID#: Paige Red Contributor address; City; State; Zip Code 14027 Memorial Dr. #410 Houston TX 77079	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/14/2022	Full name of contributor out-of-state PAC (ID#: Susan B. Jones Contributor address; City; State; Zip Code 451 Green Point Court Houston TX 77024	Amount of contribution (\$) 250.00
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.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Lisa Alpe		3 Filer ID (Ethics Commission Filers)
4 Date 04/14/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Douglas Drilling 6 Contributor address; City; State; Zip Code 20520 Cypress Plaza Parkway Apt. 4307 Cypress TX 77433	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/18/2022	Full name of contributor out-of-state PAC (ID#: _____) Cathy McConn Contributor address; City; State; Zip Code 7403 Flowerdale St. Unit A Houston TX 77055	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/18/2022	Full name of contributor out-of-state PAC (ID#: _____) Beverly Litton Contributor address; City; State; Zip Code 1433 Cedar Post Lane #5 Houston TX 77055	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/18/2022	Full name of contributor out-of-state PAC (ID#: _____) Michael Meriwether Contributor address; City; State; Zip Code 1426 Lakecliff Dr. Houston TX 77077	Amount of contribution (\$) 50.00
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.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Lisa Alpe		3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Timothy Howard 6 Contributor address; City; State; Zip Code 10027 Longmont Dr Houston TX 77042	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/21/2022	Full name of contributor out-of-state PAC (ID#: _____) Bonnie Palmer Contributor address; City; State; Zip Code 311 Yorkchester Dr. Houston TX 77079	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2022	Full name of contributor out-of-state PAC (ID#: _____) Ingrid Hartz Contributor address; City; State; Zip Code 526 Ramblewood Rd Houston TX 77079	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2022	Full name of contributor out-of-state PAC (ID#: _____) Brendan Gilbert Contributor address; City; State; Zip Code 9109 Hilledale St Houston TX 77055	Amount of contribution (\$) 1,000.00
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.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Lisa Alpe		3 Filer ID (Ethics Commission Filers)
4 Date 04/25/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Mike Mizell 6 Contributor address; City; State; Zip Code 7700 San Felipe Houston TX 77063	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/27/2022	Full name of contributor out-of-state PAC (ID#: _____) Kelly & Doug Murphy Contributor address; City; State; Zip Code 910 Flint River Houston TX 77024	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/27/2022	Full name of contributor out-of-state PAC (ID#: _____) Stephen Jones Contributor address; City; State; Zip Code 6207 Lynbrook drive Houston TX 77057	Amount of contribution (\$) 499.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/27/2022	Full name of contributor out-of-state PAC (ID#: _____) Chip Lewis Contributor address; City; State; Zip Code 1207 S. Shepherd Dr. Houston TX 77019	Amount of contribution (\$) 3,000.00
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.		

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: 6	
2 FILER NAME Lisa Alpe		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 855.00	
5 Date 03/30/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig Hagedorn 7 Contributor address; City; State; Zip Code 14227 Carolcrest Houston, TX 77079	8 Amount of Contribution \$ 125.00	9 In-kind contribution description room rental, beverages 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 04/06/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spring Branch Families PAC Contributor address; City; State; Zip Code 13623 Apple Tree Rd. Houston, TX 77079	Amount of Contribution \$ 4,584.25	In-kind contribution description Voter Outreach 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.			

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME Lisa Alpe		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0.00	
5 Date 04/08/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spring Branch Families PAC 7 Contributor address; City; State; Zip Code 13623 Apple Tree Rd. Houston, TX 77079	8 Amount of Contribution \$ 115.07	9 In-kind contribution description Printed Materials 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 04/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spring Branch Families PAC Contributor address; City; State; Zip Code 13623 Apple Tree Rd. Houston, TX 77079	Amount of Contribution \$ 750.00	In-kind contribution description Email 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.			

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:	
2 FILER NAME Lisa Alpe		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0.00	
5 Date 04/12/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spring Branch Families PAC 7 Contributor address; City; State; Zip Code 13623 Apple Tree Rd. Houston, TX 77079	8 Amount of Contribution \$ 474.49	9 In-kind contribution description Printed Materials 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 04/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jen & Matt Brice Contributor address; City; State; Zip Code 8588 Katy Freeway, #105 Houston, TX 77024	Amount of Contribution \$ 750.00	In-kind contribution description Food, Beverage 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.			

SCHEDULE A2

The Instruction Guide explains how to complete this form.						1 Total pages Schedule A2:			
2 FILER NAME Lisa Alpe						3 Filer ID (Ethics Commission Filers)			
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS						\$ 0.00			
5 Date 04/14/2022		6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenna Jackson				8 Amount of Contribution \$ 200.00		9 In-kind contribution description Food and Beverage tip for services	
		7 Contributor address; City; State; Zip Code 9109 Hilldale St Houston, TX 77055				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 04/18/2022		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FFOT PAC				Amount of Contribution \$ 4,341.34		In-kind contribution description	
		Contributor address; City; State; Zip Code PO Box 341027 Austin, TX 78734				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.									

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:	
2 FILER NAME Lisa Alpe		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0.00	
5 Date 04/21/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erin Moss 7 Contributor address; City; State; Zip Code 719 Wax Myrtle	8 Amount of Contribution \$ 506.26	9 In-kind contribution description Food, beverage 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 04/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spring Branch Families PAC Contributor address; City; State; Zip Code	Amount of Contribution \$ 350.37	In-kind contribution description Printed Materials 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.			

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:	
2 FILER NAME Lisa Alpe		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0.00	
5 Date 04/24/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan Carney 7 Contributor address; City; State; Zip Code 12315 Broken Bough Houston, TX 77024	8 Amount of Contribution \$ 750.00	9 In-kind contribution description Printing, supplies, food, beverage 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 04/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spring Branch Families PAC Contributor address; City; State; Zip Code 13623 Apple Tree Rd. Houston, TX 77079	Amount of Contribution \$ 9,166.00	In-kind contribution description Voter Outreach 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5	2 FILER NAME Lisa Alpe	3 Filer ID (Ethics Commission Filers)
4 Date 03/30/2022	5 Payee name Sprint 2 Print	
6 Amount (\$) 838.94	7 Payee address; City; State; Zip Code 8748 Clay Road, Ste 300 Houston, TX 77080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Signs
	(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	Candidate / Officeholder name	Office sought Office held

Date 04/07/2022	Payee name Sprint 2 Print	
Amount (\$) 1,082.50	Payee address; City; State; Zip Code 8748 Clay Road, Ste 300 Houston, TX 77080	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Signs
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 04/11/2022	Payee name Hotcards	
Amount (\$) 372.56	Payee address; City; State; Zip Code 2400 Superior Ave. East Cleveland, OH 44114	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Push cards
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 04/11/2022		5 Payee name Fedex Kinkos			
6 Amount (\$) 199.69		7 Payee address; City; State; Zip Code 13155 Noel Road, Suite 1600 Dallas, TX 75240			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising		(b) Description Push cards		
	(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		Candidate / Officeholder name Office sought Office held			
Date 04/14/2022		Payee name Spring Branch Families PAC			
Amount (\$) 2,583.00		Payee address; City; State; Zip Code 13623 Apple Tree Rd.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation		Description Voter Outreach		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held			
Date 04/21/2022		Payee name Swoon Media			
Amount (\$) 500.00		Payee address; City; State; Zip Code 12335 Kingsride #147 Houston, TX 77024			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Magazine		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held			
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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:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 04/18/2022		5 Payee name Sprint 2 Print			
6 Amount (\$) 947.19		7 Payee address; City; State; Zip Code 8748 Clay Road, Ste 300 Houston, TX 77080			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising		(b) Description Signs		
	(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		Candidate / Officeholder name		Office sought Office held	
Date 04/22/2022		Payee name TnT Shirts			
Amount (\$) 1,087.64		Payee address; City; State; Zip Code 2400 Taft St. Houston, TX 77006			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Shirts		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/25/2022		Payee name Sprint 2 Print			
Amount (\$) 954.23		Payee address; City; State; Zip Code 8748 Clay Road, Ste 300 Houston, TX 77080			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Signs		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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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:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 04/27/2022		5 Payee name Raise the Money			
6 Amount (\$) 510.41		7 Payee address; City; State; Zip Code P. O. Box 26466 Little Rock, AR 72221			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Banking		
	(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		Candidate / Officeholder name		Office sought Office held	
Date 04/27/2022		Payee name Colon & Company			
Amount (\$) 2,836.22		Payee address; City; State; Zip Code 3311 Richmond Ave. Suite 319 Houston, TX 77019			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Mailer		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/27/2022		Payee name Colon & Company			
Amount (\$) 2,307.34		Payee address; City; State; Zip Code 3311 Richmond Ave. Suite 319 Houston, TX 77019			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Mailer		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date 04/27/2022	5 Payee name Colon & Company		
6 Amount (\$) 2,586.35	7 Payee address; City; State; Zip Code 3311 Richmond Ave. Suite 319 Houston, TX 77019		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising		(b) Description Mailer
	(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	Candidate / Officeholder name		Office sought Office held

Date 04/27/2022	Payee name Colon & Company		
Amount (\$) 787.19	Payee address; City; State; Zip Code 3311 Richmond Ave. Suite 319 Houston, TX 77019		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Push cards
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought Office held

Date 04/27/2022	Payee name Colon & Company		
Amount (\$) 1,064.44	Payee address; City; State; Zip Code 3311 Richmond Ave. Suite 319 Houston, TX 77019		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Text fees
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought Office held

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