CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how t		Filer ID (Ethics Comm	ission Filers)	2 Total pages f	iled: 11
CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST John	N		OFFICE	USE ONLY
NAME	NICKNAME	LAST Perez	S	UFFIX	Date Received	
CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX:	APT/SUITE#: CITY	ed Housto	TX 7079		
GANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION O181	- 1	Date Hand-delivere	ed or Date Postmarked
CAMPAIGN TREASURER	MS / MRS / MR	Birst Birst	, n	A1	Receipt #	Amount S
NAME	NICKNAME	Schwertner	5	SUFFIX	Date Imaged	
CAMPAIGN TREASURER ADDRESS (Residence or Business)		O PO BOX PLEASE); APT / SUITI		7079	STATE;	ZIP CODE
3 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION 2125		A .	
9 REPORT TYPE	January 15	30th day before elec	tion Runoff		treasurer	after campaign appointment der Only)
	July 15	8th day before election	on Exceed Reporti	ed Modified ng Limit	Final Rep	oort (Attach C/OH - FR)
O PERIOD COVERED	Month O 4	Day Year 2022	THROUGH	Month 06		ear DUDD
11 ELECTION	ELECTION DA'	TE Primary General	EL Runoff Special	ECTION TYPE Other Description		
12 OFFICE	OFFICE HELD (if any) Board of Tru	itees Posithbn 6, SB	ISO 13 OFFICE SOL	JGHT (if known)		
14 NOTICE FROM POLITICAL	THE CANDIDATE / OFFICE	E OF POLITICAL CONTRIBUTIONS AC EHOLDER. THESE EXPENDITURES IN A AND OFFICEHOLDERS ARE REQUIRE	AAY HAVE BEEN MADE WIT	HOUT THE CANDIL	DATE'S OR OFFICE	IOLDER'S KNOWLEDGE
COMMITTEE(S)	COMMITTEE TYPE	Texans for E	ducational f	reedon		
Additional Pages	GENERAL SPECIFIC	PO 13 x 3 4 102	7 awth,	Tx 787	34	
	Jar Edirio	Cabell Hob	191			n=cour
		POBOL 341027		78734		

CANDIDATE / OFFICEHOLDER FORM C/OH **COVER SHEET PG 1** CAMPAIGN FINANCE REPORT 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. М 3 CANDIDATE/ MS / MRS / MR FIRST OFFICE USE ONLY OFFICEHOLDER JOHN 丌. NAME Date Received SUFFIX NICKNAME LAST Ponet ZIP CODE ADDRESS / PO BOX; APT / SUITE #; 4 CANDIDATE/ STATE: **OFFICEHOLDER** MAILING **ADDRESS** Change of Address AREA CODE EXTENSION PHONE NUMBER 5 CANDIDATE/ Date Hand-delivered or Date Postmarked **OFFICEHOLDER** PHONE Amount \$ Receipt # MS / MRS / MR FIRST м 6 CAMPAIGN TREASURER Date Processed NAME NICKNAME LAST SUFFIX Date Imaged STATE; ZIP CODE CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: TREASURER **ADDRESS** (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER EXTENSION **TREASURER** PHONE 9 REPORT TYPE 15th day after campaign 30th day before election Runoff January 15 treasurer appointment (Officeholder Only) Exceeded Modified Final Report (Attach C/OH - FR) July 15 8th day before election Reporting Limit 10 PERIOD Month COVERED **THROUGH ELECTION TYPE ELECTION DATE** 11 ELECTION Other Description Primary Runoff Day Month General Special 13 OFFICE SOUGHT (if known) OFFICE HELD (if anv) 12 OFFICE THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OPPICEHOLDER. 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. 14 NOTICE FROM **POLITICAL** COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE BRANCH FAMILIES ME COMMITTEE ADDRESS GENERAL 13623 APRIE TREE RD. HOWSTON, TX 77079 Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC MELANIE SAUNDERS COMMITTEE CAMPAIGN TREASURER ADDRESS 13623 APPLE TRUE ROAD, HOUSTON, TX 77079 **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

CAMPAIGI	I FINANCE REPORT	
15 C/OH NAME	HN TRAVIS PEREZ	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAT PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	s Ø
	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 15, 794.64
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 13,209.49
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LA- OF REPORTING PERIOD	ST DAY \$ 1,052.43
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD	* 5, 550.00
18 SIGNATURE I s	wear, or affirm, under penalty of perjury, that the accompanying report is tru	e and correct and includes all information
rec	uired to be reported by me under Title 15, Election Code.	A 4
	Simulation	andidate as Officebalds
	Signature of Ca	andidate or Officeholder
	Please complete either option belov	v:
(1) Affidavit	CHERYL M. JEFFERS My Notary ID # 128119089 Expires December 1, 2025	
NOTARY STAMP/SEAL		
Sworn to and subscribed	before me by John Perez this the	18th day of July.
hery m	which, witness my hand and seal of office. Chery M. Teffers	Exec. Assistant
Signature of officer administer	-	Title of officer administering oath
/a) 11	OR	
(2) Unsworn Declaration	n	
My name is	and my date of birth is	
		state) (zip code) (country)
Executed in	County, State of , on the day of (month	, 20 _(year) .
	Signature of Candid	date/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	John Travis Perez	s Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 860
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	३ १५९३५.७५
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 13,284,35
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	\$ 475.14
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF CA	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

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	John Travis Perez	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
04/30/22	Beverly Litton 6 Contributor address; City; State; Zip Code 1477) (eda: Post Lane #5 Howston TX 77055	\$ 25.00
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instructions)	ions)
Date	Full name of contributor	Amount of contribution (\$)
05-01-22	Mark Fubank) Contributor address; City: State; Zip Code	\$ 300.00
	13918 Saint Mary's Lane Houston, Tx 77079	4 JUU.06
Principal occup	ation / Job title (See Instructions) Employer (See Instruct	ions)
Date	Full name of contributor	Amount of contribution (\$)
05/03/22	Contributor address; City; State; Zip Code	\$ 15.0.
	143) (edar Post Lune #5 Howston, TX 77055	
Principal occup	eation / Job title (See Instructions) Employer (See Instructions)	tions)
Date	Full name of contributor	Amount of contribution (\$)
15/50/20	Contributor address; City; State; Zip Code	\$ 20.00
	13155 Rummel (reck Rd Houston, TX 77079	n 20,00
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	tions)
	ATTACH ADDITIONAL CODIES OF THIS SOUTHING AS	IEEDER
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS A lift contributor is out-of-state PAC, please see instruction guide for additional	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

FILER NAME	John Tranis Pe			4
Date		142		3 Filer ID (Ethics Commission Filers)
	5 Full name of contributor Howston Region 6 Contributor address; 4500 Rissonne	Business (or	State; Zip Code	7 Amount of contribution (\$)
Principal occup	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)		Employer (See Instruc	tions)
		Total Control		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requ	ested information is not applicable, DO NOT includ	e this page	in the report.		
TI	he instruction Guide explains how to complete this for	n.	1 Total pages Sched	dule A2: 2	
2 FILER NAM	SOHN TRAVIS PEREZ		3 Filer ID (Ethles Co	ommission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS	\$	_	
	6 Full name of contributor out-of-state PAC (ID#:	(77079	Check if travel outs	VOTER OUTRE ACH Ide of Texas. Complete Schedule T.	
	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)			AL)(See Instructions)	
	e principal occupation (FOR JUDICIAL) semployer/law firm (FOR JUDICIAL)			Se (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 5/12/2022	Full name of contributor out-of-state PAC (ID#:	Zip Code	Amount of Contribution \$ \$5350.00	In-kind contribution description Contribution Contributi	
	upation / Job title (FOR NON-JUDICIAL) (See Instructions)			AL)(See Instructions)	
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	tor's job title (FOR JU	IDICIAL) (See Instructions)	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	of contributor's spou	se (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
ı	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

1 Total pages Schedule A2: 2
3 Filer ID (Ethles Commission Filers)
·
Amount of 9 In-kind contribution description ADVORTIS PRINTED Check If travel outside of Texas. Complete Schedule T.
(FOR NON-JUDICIAL)(See Instructions)
or's job title (FOR JUDICIAL) (See Instructions)
of contributor's spouse (if any) (FOR JUDICIAL)
Amount of Contribution \$\\ \[3\\ \ \ 2 \cdot 8 \\ \] Check if travel outside of Texas. Complete Schedule T.
(FOR NON-JUDICIAL)(See Instructions)
r's job title (FOR JUDICIAL) (See Instructions)
of contributor's spouse (if any) (FOR JUDICIAL)
E AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

	EXPENDITURE CATEGORIES F	OR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Over Food/Beverage Expense Polling Exp Gift/Awards/Memorials Expense Printing Ex	pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
Total pages Schedule F1:	2 FILER NAME John Travis Perez		3 Filer ID (Ethics Commission Filers)
Date Varion 04/28/22 Through	5 Payee name anedot Inc.		
5 Amount (\$) \$ 15.60	7 Payee address: 1740 Paydras Street Suite 1770	City; New Osterns	State: Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accountly / Panking	(b) Description	ees
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held
Date 07-16-2022	Spring Brunch Families	PHI	
03 - 10 8-0 - 1	Spirks Store Country es	. ,,,	
Amount (\$)	Payee address: 1762) Apple Tree Rd Hows	City;	State: Zip Code い子 9
Amount (\$)	Payee address;	City:	·
Amount (\$)	Payee address: 1762) Apple Tree Rd Hows Category (See Categories listed at the top of this schedule) (ontribution/Jonation made by	City: ton, Tx 77 Description Contribution	υ 7 9
Amount (\$)	Payee address: 1762) Apple Tree Rd Hows Category (See Categories listed at the top of this schedule) (ontribution / Ponntion made by (unidate/Officeholder/Political Counties Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name	City: ton, Tx 77 Description Contribution	c79 mude by Canidate
PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee address: 1762) Apple Tree Rd Hows Category (See Categories listed at the top of this schedule) (ontribution / Ponntion made by (unidate/Officeholder/Political Counties Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name	City: ton, Tx 77 Description Contribution Check if Aus	c79 made by Canidate stin. TX. officeholder living expense
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Payee address: 1762) Apple Tree Rd Hours Category (See Categories listed at the top of this schedule) (ontribution / Jonation made by (anitable/Officebolder/Political Countries Check if travel outside of Texas. Complete Schedule T. Candidate / Officebolder name	City: ton, Tx 77 Description Contribution Check if Aus	c79 made by Canidate stin. TX. officeholder living expense
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 05/27/2024 Amount (\$)	Payee address: 1762) Apple Tree Rd Hous Category (See Categories listed at the top of this schedule) (ontribution / Deartion made by (unitable / Office bolder / Political Countries Check if travel outside of Texas. Complete Schedule T. Candidate / Office holder name H	City: Ton, Tx 77 Description Contribution Check if Aus Office sought	c79 mude by Canidate stin. TX. officeholder living expense
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 05/11/1224	Payee address: 1762) Apple Tree Rd Hous Category (See Categories listed at the top of this schedule) (ontribution / Jonation made by (unidate/Officebolder/Political Countries Check if travel outside of Texas. Complete Schedule T. Candidate / Officebolder name Payee name ORR Strutegy browp Payee address:	City: ton, Tx 77 Description Contribution Check if Aus Office sought City: Howston Description	mude by Canidate tin. TX. officeholder living expense Office held State: Zip Code
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 05/27/2022 Amount (\$) \$1,500.66	Payee address: 1762) Apple Tree Rd Hows Category (See Categories listed at the top of this schedule) (ontribation / Jonation made by (unidate / Office bolder / Political Countries Check if travel outside of Texas. Complete Schedule T. Candidate / Office holder name Payee name ORR Strategy browp Payee address: 1707 1/2 Poit Oak Blod #40: Category (See Categories listed at the top of this schedule)	City: ton, Tx 77 Description Contribution Check if Aus Office sought City: Howster Description (ampaig	orange by Canidate tin. TX. officeholder living expense Office held State: Zip Code Tx 77016

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

		,			F	
- Control of the Cont		EXPENDITURE CAT	EGORIES F	OR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla	Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor	Solicitation/Fundrais Transportation Equip Travel In District Travel Out Of Distric Other (enter a categ	oment & Related Expense
1 Total pages Schedule F1:	2 FILER N	AME John Travis Per	17		3 Filer ID (Ethic	s Commission Filers)
4 Date 05/27/2022	5 Payee na					
6 Amount (\$)	7 Payee ad	· · · · · · · · · · · · · · · · · · ·		City;	State;	Zip Code
A 782.75	1707 /	& Postoak Blud #	107	Houston, T.	x 77056	
8	(a) Categor	y (See Categories listed at the top of the	nis schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Con	sulting Expenses		(ang cign	Services	
	(c)	Check if travel outside of Texas. Complete	e Schedule T.	Check if Austi	in, TX, officeholder livin	g expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder name		Office sought		Office held
Date 06-12-2022	Payee na	ame an Travis Per	'e 7			
Amount (\$)	Payee ad	ddress;		City;	State;	Zip Code
\$ 8,618.00		5 Taylorcrest	Road		, TX 7	
	Category	(See Categories listed at the top of th	is schedule)	Description		
PURPOSE OF EXPENDITURE	Re	imburse ment		Reinbursem expenditue	ent of police mude w/p	tial Jersonal Funds
		Check if travel outside of Texas. Complet	e Schedule T.	Check if Austi	in, TX, officeholder livin	g expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder name	11/02	Office sought		Office held
Date	Payee n	ame				
06/24/2022	70	, ha travis Per	ez			
Amount (\$)	Payee a			City;	State;	Zip Code
\$ 900.00	136	15 Taylor crest	Road	Houston	Tx 7	7079
PURPOSE OF EXPENDITURE		(See Categories listed at the top of th	is schedule)	Description Reinburgen expenditures	ent of polymade from	tical personal Funds
		Check if travel outside of Texas. Complet	e Schedule T.	Check if Aust	tin, TX, officeholder livin	ng expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		date / Officeholder name		Office sought		Office held
	ΑT	TACH ADDITIONAL COPI	ES OF THIS	SCHEDULE AS NE	EDED	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salanes/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Total pages Schedule G:			
l lotal pages constant c.	2 FILER NAME John Travis Perez		3 Filer ID (Ethics Commission Filers)
05/13/2022	5 Payee name American Express		
\$ 371.52	7 Payee address;	City;	State; Zip Code
Reimbursement from political contributions intended	Pog. 3 650 448	Dallas	Tx 75265
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (red: + Card Payment		redit landsill for
	(c) Check if travel outside of Texas. Complete Schedule T.		X, officeholder living expense
) Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
04/04/2022	Payee name (itiban K		
Amount (\$)	Payee address;	City;	State; Zip Code
Reimbursement from political contributions intended	1500 Bolton field Street	Columbus, OH	43774
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (redit (and Payment	Description Payment of (Vitapin	redit (and bill for t custom (and)
	Check if travel outside of Texas. Complete Schedule T.		TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
Reimbursement from political contributions intended			
PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description	
EXPENDITURE	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