CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	The C/OH Instruction Guide explains how to complete this form.		2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST	MI	OFFICE	USE ONLY
NAME	LAURA		Date Received	
	NICKNAME LAST	SUFFIX		
	ADDISON	N	04-23-24P	01.74 00
4 CANDIDATE/	ADDRESS / PO BOX; APT / SUITE #;	CITY: STATE; ZIP CODE	04-23-246	01.34 KC
OFFICEHOLDER MAILING				
ADDRESS	Galveston, TX 77	1551		
Change of Address	ADEA CODE DUONE NUMBER	EVTENSION		-
5 CANDIDATE/ OFFICEHOLDER	AREA CODE PHONE NUMBER	EXTENSION	Date Hand-delivered	or Date Postmarked
PHONE				
6 CAMPAIGN TREASURER	MS/MRS/MR FIRST	MI	Receipt #	Amount \$
NAME	NICKNAME LAST	SUFFIX	Date Processed	
	ADDICAN	1	Date Imaged	
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / S	SUITE #; CITY;	STATE:	ZIP CODE
TREASURER ADDRESS				
(Residence or Business)	6alveston,	TV COSSI		
	54/605/	11 1/1/201		
8 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION		
TREASURER PHONE	5 5 8			
THOME	•			
9 REPORT TYPE	January 15 30th day before e	election Runoff	15th day aft	er campaign
		Lambert Control of Con	treasurer ap (Officeholder	
	July 15 8th day before ele	ection Exceeded \$500 limit	Final Report	(Attach C/OH - FR)
10 DEDICE		Co. 19		
10 PERIOD COVERED	Month Day Year	Month	Day Year	0.0
	10 /31/2023	THROUGH	30 / 20:	23
11 ELECTION	ELECTION DATE	ELECTION TYPE		
	Month Day Year Primary	Runoff Other Description		
	11 7 2023 S General	FOR THE STATE OF T		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
		GALVEST School BOOM	on.	1
		School Boox	d distr	of 5-€
		30.00		
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	rura Aa	dison	5 Filer ID (Ethics Commission Filers)
16 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 OF 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		
	SPECIFIC	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED		AN \$	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6
EXPENDITURE TOTALS 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LES UNLESS ITEMIZED			\$
	4. TOTAL POLITICAL EXPENDITURES \$ 52.80		\$ 52.80
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		DAY \$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$		HE \$
18 AFFIDAVIT			
			erjury, that the accompanying report is primation required to be reported by me
		Signature of Cano	didate or Officeholder
AFFIX NOTARY STAM	P/SEALABOVE		
Sworn to and subsc	ribed before me, l	by the said	, this the
day of	, 20,	to certify which, witness my hand and seal of office.	
Signature of officer a	administering oath	Printed name of officer administering oath	Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME Addisor 20 Filer ID (E	thics Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTION	15 \$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 52.80
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	С/ОН \$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURN TO FILER	ED \$

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Contributions/Donations Made (Candidate/Officeholder/Politic Credit Card Payment		Expense /Wages/Contract Labor complete this form.	Travel Out Of District Other (enter a categor	y not listed above)
1 Total pages Schedule G:	2 FILER NAME Addison		3 Filer ID (Ethics	Commission Filers)
11 2 2023	5 Payee name USPS			
Amount (\$) \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	7 Payee address; 5826 Broadwa	1 Galleston	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Supplies		FOR POST	
	(c) Check if trav boutside of Texas. Complete Schedule T.		TX, officeholder living ex	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	alvesta Sch		S-E -
Date	Payee name			
Amount (\$)	Payee address;	City;	State;	Zip Code
Reimbursement from political contributions intended				
PURPOSE OF EXPENDITURE	Category (See Calegories listed at the top of this schedule)	Description		
EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living e	xpense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	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 e	xpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEED!	ĒD	

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

	The Instruction Guide explains how to complete this form. •• Complete only if "Report Type" on page 1 is marked "Final Report" ••					
1	C/OH N	Laura Addison	2 Filer ID (Ethics Commission Filers)			
3	SIGNA	TURE				
	ing a re	expect any further political contributions or political expenditures in connection with my port as a final report terminates my campaign treasurer appointment. I also understar tions or make any campaign expenditures without a campaign treasurer appointment. Signature	nd that I may not accept any campaign			
4		ILER WHO IS NOT AN OFFICEHOLDER Complete A & B below <i>only</i> if you are not an officeholder. ••				
	A.	CAMPAIGN FUNDS				
	Chec	k only one:				
		I do not have unexpended contributions or unexpended interest or income earned from	om political contributions.			
		I have unexpended contributions or unexpended interest or income earned from political convert unexpended political contributions or unexpended interest or incompersonal use. I also understand that I must file an annual report of unexpended unexpended contributions or unexpended interest or income earned on political contributions final report. Further, I understand that I must dispose of unexpended political contributions in accordance with the requirements of Elections.	me earned on political contributions to contributions and that I may not retain ibutions longer than six years after filing ontributions and unexpended interest or			
	B.	ASSETS				
	Chec	Check only one:				
		I do not retain assets purchased with political contributions or interest or other income from political contributions.				
		I do retain assets purchased with political contributions or interest or other income from that I may not convert assets purchased with political contributions or interest or other personal use. I also understand that I must dispose of assets purchased with politic requirements of Election Code, § 254.204.	er income from political contributions to			
			Signature of Candidate			
5		EHOLDER uplete this section only if you are an officeholder				
		I am aware that I remain subject to filing requirements applicable to an officeholder who file. I am also aware that I will be required to file reports of unexpended contributions if, officeholder, I retain political contributions, interest or other income from political contributions or interest or other income from political contributions.	after filing the last required report as an			
		9	ignature of Officeholder			