

# 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: <b>1317</b>
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR                      FIRST                      MI <b>Mr.</b> <b>Quinton</b> <b>Q</b> NICKNAME                      LAST                      SUFFIX  <b>Phillips</b>	<b>OFFICE USE ONLY</b>	
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b> <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE <b>PO Box 24615                      Fort Worth, TX 76124</b>	4/6/2023	
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	AREA CODE                      PHONE NUMBER                      EXTENSION <b>( 817 )                      938-5282</b>	Date Received	
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR                      FIRST                      MI <b>Mr.</b> <b>Dante</b> <b>J</b> NICKNAME                      LAST                      SUFFIX  <b>Williams</b>	Date Hand-delivered or Date Postmarked	
<b>7 CAMPAIGN TREASURER ADDRESS</b> (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE <b>2800 Yeager St, Fort Worth, TX 76112</b>		
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE                      PHONE NUMBER                      EXTENSION <b>( 817 )                      874-0309</b>		
<b>9 REPORT TYPE</b>	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
<b>10 PERIOD COVERED</b>	Month                      Day                      Year                      Month                      Day                      Year <b>01 / 16 / 2023                      THROUGH                      03 / 27 / 2023</b>		
<b>11 ELECTION</b>	ELECTION DATE Month                      Day                      Year <b>05 / 06 / 2023</b>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
<b>12 OFFICE</b>	OFFICE HELD (if any)  <b>School Board Trustee - District 3</b>	<b>13 OFFICE SOUGHT (if known)</b>	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 2**

**14 C/OH NAME**  
**Quinton 'Q' Phillips**

**15 Filer ID (Ethics Commission Filers)**

**16 NOTICE FROM POLITICAL COMMITTEE(S)**

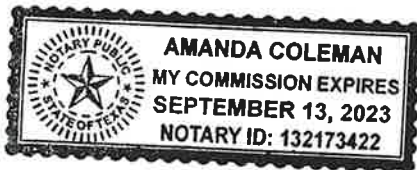
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO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

<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME <b>For The Children PAC</b>
	COMMITTEE ADDRESS <b>PO Box 159, Fort Worth, TX 76102</b>	
	COMMITTEE CAMPAIGN TREASURER NAME <b>Corey Bearden</b>	
	COMMITTEE CAMPAIGN TREASURER ADDRESS <b>PO Box 159, Fort Worth, TX 76102</b>	

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 59.20
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9,608.30
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 544.37
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,268.15
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 6,872.79
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

**18 AFFIDAVIT**

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



*[Handwritten Signature]*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Quinton Phillips, this the 6th day of April, 2023, to certify which, witness my hand and seal of office.

*[Handwritten Signature]*      Amanda Coleman      Election Officer  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - C/OH

**FORM C/OH  
COVER SHEET PG 3**

<b>19 FILER NAME</b> <b>Quinton 'Q' Phillips</b>		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1. <input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 9,608.30
2. <input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/>	SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,268.15
6. <input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 7

2 FILER NAME

**Quinton 'Q' Phillips**

3 Filer ID (Ethics Commission Filers)

4 Date

03/03/23

5 Full name of contributor

For The Children PAC

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

\$2,500.00

6 Contributor address;

City; State; Zip Code

PO Box 159, Fort Worth, TX 76102

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/24/23

Full name of contributor

J Lewis Alston

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

1421 Mesa Flats Dr Haslet, TX 76133

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/2/2023

Full name of contributor

Anthony Johnson

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$50.00

Contributor address;

City; State; Zip Code

1317 Prelude DR Fort Worth, TX 76134

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/2/2023

Full name of contributor

Brice Wells

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

5216 W Verde Circle Fort Worth, TX 76126

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 7

2 FILER NAME

**Quinton 'Q' Phillips**

3 Filer ID (Ethics Commission Filers)

4 Date

3/3/2023

5 Full name of contributor

**Daryl Davis**

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address; City; State; Zip Code

9261 Vineyard Ln. Fort Worth, TX 76126

7 Amount of contribution (\$)

\$100

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/3/2023

Full name of contributor

**Sara Pereda**

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

2321 Ryan Ave. Fort Worth, TX 76100

Amount of contribution (\$)

\$250

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/4/2023

Full name of contributor

**Roderick Miles Jr.**

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

7437 Whisterwheel Way Fort Worth, TX 76123

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/5/2023

Full name of contributor

**James McFayden**

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

3315 Carrington Ln. Bloomington, IL 61705

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 7

2 FILER NAME

**Quinton 'Q' Phillips**

3 Filer ID (Ethics Commission Filers)

4 Date

3/9/2023

5 Full name of contributor

**Kent Bradshaw**

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

**\$250**

6 Contributor address; City; State; Zip Code

2009 6th Ave. Fort Worth, TX 76110

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/10/2023

Full name of contributor

**Roderick Miles Jr.**

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

**\$100**

Contributor address; City; State; Zip Code

7437 Whisterwheel Way Fort Worth, TX 76123

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/10/2023

Full name of contributor

**Joshua Rivers**

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

**\$100**

Contributor address; City; State; Zip Code

7020 Greenview Circle Fort Worth, TX 76120

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/13/2023

Full name of contributor

**Steven Poole**

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

**\$100**

Contributor address; City; State; Zip Code

3611 W. 5th St. Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 7

2 FILER NAME

**Quinton 'Q' Phillips**

3 Filer ID (Ethics Commission Filers)

4 Date

3/16/2023

5 Full name of contributor

**Richard Harleaux**

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address;

City; State; Zip Code

6116 Forest Ln. Fort Worth, TX 76112

7 Amount of contribution (\$)

\$250

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/16/2023

Full name of contributor

**Barbara Clark**

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City; State; Zip Code

1501 Saxony Road Fort Worth, TX 76116

Amount of contribution (\$)

\$250

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/16/2023

Full name of contributor

**Edmond Moss**

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City; State; Zip Code

5625 Eisenhower Dr. Fort Worth, TX 76112

Amount of contribution (\$)

\$50

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/16/2023

Full name of contributor

**Daryl Davis**

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City; State; Zip Code

9216 Vineyard Ln. Fort Worth, TX 76123

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 7

2 FILER NAME

**Quinton 'Q' Phillips**

3 Filer ID (Ethics Commission Filers)

4 Date

3/16/2023

5 Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

**Patrick Winfield**

6 Contributor address;

City; State; Zip Code

5225 Meadowland Dr. Fort Worth, TX 76123

7 Amount of contribution (\$)

\$100

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/16/2023

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

**Willie Rankin**

Contributor address;

City; State; Zip Code

7104 Bannock Dr. Fort Worth, TX 76179

Amount of contribution (\$)

\$50

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/16/2023

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

**Blake Moorman**

Contributor address;

City; State; Zip Code

PO Box 3523

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/16/2023

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

**Alex McCulloch**

Contributor address;

City; State; Zip Code

1228 E. Harvey Ave. Fort Worth, TX 76104

Amount of contribution (\$)

\$50

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 7

2 FILER NAME

**Quinton 'Q' Phillips**

3 Filer ID (Ethics Commission Filers)

4 Date

3/16/2023

5 Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Efrin Carrion

6 Contributor address;

City; State; Zip Code

4416 Morris Court Fort Worth, TX 76103

7 Amount of contribution (\$)

\$250

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/16/2023

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Jared Williams

Contributor address;

City; State; Zip Code

PO Box 16012

Amount of contribution (\$)

\$250

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/18/2023

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Shelly Whitfield

Contributor address;

City; State; Zip Code

1319 Black Walnut Lane Arlington, TX 76005

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/19/2023

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Dr. Mia Hall

Contributor address;

City; State; Zip Code

4629 Maple Hill Dr. Fort Worth, TX 76123

Amount of contribution (\$)

\$50

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 7

2 FILER NAME

**Quinton 'Q' Phillips**

3 Filer ID (Ethics Commission Filers)

4 Date

3/20/2023

5 Full name of contributor

**Donna James-Harvey**

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address; City; State; Zip Code

3535 Routh St. Unit B Dalls, TX 75219

7 Amount of contribution (\$)

\$100

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/22/2023

Full name of contributor

**Laura Hunter**

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

3001 Harlanwood Dr. Fort Worth, TX 76109

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/24/2023

Full name of contributor

**Kevin OHanlon**

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

808 West Avenue Austin, TX 78701

Amount of contribution (\$)

\$2,000

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/27/2023

Full name of contributor

**Rolinda Schmidt**

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

222 Sidney Baker South Suite 305 Kerrville, TX 78028

Amount of contribution (\$)

\$100

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.

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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.

<b>1</b> Total pages Schedule F1: <b>2</b>	<b>2</b> FILER NAME <b>Quinton 'Q' Phillips</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 02/21/23	<b>5</b> Payee name GoDaddy
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<b>6</b> Amount (\$) \$40.34	<b>7</b> Payee address; City; State; Zip Code 14455 N. Hayden Rd. Suite. 226, Scottsdale Arizona 85260-6947
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---	--	--

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 02/28/23	Payee name La Rueda Mexican Restaraunt
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Amount (\$) \$40.60	Payee address; City; State; Zip Code 2317 Oakland Blvd, Fort Worth, TX 76103
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 03/13/23	Payee name Williams Sign Company
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Amount (\$) \$2,381.77	Payee address; City; State; Zip Code 3933 E California Pkwy # C, Forest Hill, TX 76119
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>2</b>	<b>2</b> FILER NAME <b>Quinton 'Q' Phillips</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 03/17/23	<b>5</b> Payee name Turkey Den	
<b>6</b> Amount (\$) \$342.01	<b>7</b> Payee address; City; State; Zip Code 1201 Oakland Blvd Ste 1111, Fort Worth, TX 76103	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought                      Office held
Date 03/21/23	Payee name La Rueda Mexican Restaraunt	
Amount (\$) \$79.51	Payee address; City; State; Zip Code 2317 Oakland Blvd, Fort Worth, TX 76103	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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**