CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT						FORM C/OH COVER SHEET PG 1	
The C/OH Instruction Guide explains how to complete this form.						2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST MI Sarah			OFFICE Date Received	OFFICE USE ONLY		
	NICKNAME	LAST Weinberg	***************************************	SUFFIX	**************************************		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT PO 226163	/ SUITE #; CITY		ZIP CODE	Date Hand delivere	d or Date Postmarked	
Change of Address	Dallas, TX 75222				Date Processed Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Chris	-	MI			
	NICKNAME	LAST Peters	***************************************	SUFFIX		,	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5112 Victor Street, Dallas, TX 75214						
7 CAMPAIGN TREASURER PHONE	AREA CODE PHO	NE NUMBER EX	XTENSION 9855				
8 REPORT TYPE	X January 15 [30th day before el	<u> </u>	Runoff Exceeded modified reporting limit	appointment (c	campaign treasurer officeholder only) httach C/OH-FR)	
9 PERIOD COVERED	Month Day Year 07/01/2023	THE	ROUGH	Month Da 12/31/2	•		
10 ELECTION	ELECTION DATE Month Day Year		mary	ELECTION TYPE Runoff Special	Other		
11 OFFICE	OFFICE HELD (If any) Place District 2 District Dallas ISD				SHT (if known)		
		GO TO	D PAGE 2				
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FORM C/OH CANDIDATE / OFFICEHOLDER REPORT: **COVER SHEET PG 2 SUPPORT & TOTALS** 2 of 4 14 Filer ID 13 C / OH NAME Weinberg, Sarah 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 15 NOTICE consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. FROM POLITICAL COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE Additional Pages GENERAL COMMITTEE ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, 16 CONTRIBUTION OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 0.00 \$ **TOTALS** TOTAL POLITICAL CONTRIBUTIONS 0.00 \$ (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) TOTAL UNITEMIZED POLITICAL EXPENDITURES 0.00 EXPENDITURE \$ **TOTALS** TOTAL POLITICAL EXPENDITURES 680.92 S TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE 1,896.02 CONTRIBUTION \$ REPORTING PERIOD BALANCE TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OUTSTANDING \$ 0.00 OF THE REPORTING PERIOD **LOAN TOTALS** 17 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. MARGARET S THOMPSON Notary ID #10411048 My Commission Expires July 16, 2024 AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said ___ , to certify which, witness my hand and seal of office.

SUBTOTALS - C/OH	FORM C/OH
	COVER SHEET PG 3
18 FILER NAME Weinberg, Sarah	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	s
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	s
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 680.92
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	s
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	s
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	s
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	s
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	s
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	s
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	s
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POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 **CONTRIBUTIONS EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The instruction Guide explains how to complete this form. Credit Card Payment 3 Filer ID 1 Total pages Schedule F1: 2 FILER NAME Weinberg, Sarah Sch: 1/1 Rpt: 4/4 5 Payee name 4 Date 12/27/2023 Jolt Social Media State: Zip Code 7 Payee address; City; 6 Amount (\$) 4150 Wycliff Ave \$680.92 Suite 101 Dallas, TX 75219 (b) Description PURPOSE (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Consulting Expense OF Check if Austin, TX, officeholder living expense EXPENDITURE Website Updates Office held Office sought Candidate/Officeholder name 9 Complete ONLY if direct expenditure to benefit C/OH Version V3.5.1.0bfcfb67

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