

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:

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY		
	NICKNAME	LAST	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			Date Received 04/04/2024 1:58PM [Signature]		
☐ Change of Address	[Redacted] Austin, TX 78738					
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked 04/04/2024		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$	
	NICKNAME	LAST	SUFFIX	Date Processed	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE			(Residence or Business) [Redacted] Austin, TX 78738		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	[Redacted]		
9 REPORT TYPE	☐ January 15 ☒ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only) ☐ July 15 ☐ 8th day before election ☐ Exceeded Modified Reporting Limit ☐ Final Report (Attach C/OH - FR)					
10 PERIOD COVERED	Month Day Year 1 / 1 / 24 THROUGH 3 / 25 / 24 Month Day Year					
11 ELECTION	ELECTION DATE		ELECTION TYPE			
	Month	Day	Year	☐ Primary ☐ Runoff ☐ Other Description 5 / 4 / 2024 ☒ General ☐ Special		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)			
			School Trustee Place 2			
14 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.					
☒ Additional Pages ☐ GENERAL ☐ SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME				
		Lake Travis Families PAC				
		COMMITTEE ADDRESS				
		[Redacted] Austin, TX 78701				
	COMMITTEE CAMPAIGN TREASURER NAME					
	Christian Alvarado					
	COMMITTEE CAMPAIGN TREASURER ADDRESS					
	[Redacted] Austin, TX 78701					

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

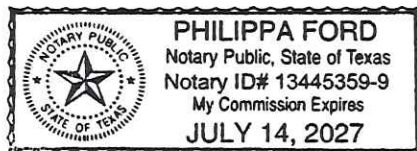
15 C/OH NAME <u>Christy Comfort</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>8634.07</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>2701.57</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.

Christy Comfort
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by CHRISTY COMFORT this the 4 day of APRIL,

2024, to certify which, witness my hand and seal of office.

Philippa Ford
Signature of officer administering oath

PHILIPPA FORD
Printed name of officer administering oath

ACCOUNTANT
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

Christy Comfort

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1320. ⁰⁰
2.	☒ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 7314. ⁰⁷
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 CONTRIBUTIONS	\$
8.	☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	☒ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 2701. ⁵⁷
10.	☐ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/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

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

2 FILER NAME

Christy Comfort

3 Filer ID (Ethics Commission Filers)

4 Date

2/29/24

5 Full name of contributor

☐ out-of-state PAC (ID#:

Tanica Ballman

7 Amount of contribution (\$)

100.00

6 Contributor address;

City;

State; Zip Code

Temple, TX

76502

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/7/24

Full name of contributor

☐ out-of-state PAC (ID#:

Michael LaRocca

Amount of contribution (\$)

100.00

Contributor address;

City;

State; Zip Code

Lakeway, TX 78738

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/9/24

Full name of contributor

☐ out-of-state PAC (ID#:

Lauren Hackstedt

Amount of contribution (\$)

100.00

Contributor address;

City;

State; Zip Code

Lakeway, TX 78738

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/17/24

Full name of contributor

☐ out-of-state PAC (ID#:

Alex Dunlap

Amount of contribution (\$)

10.00

Contributor address;

City;

State; Zip Code

Spicewood, TX 78669

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

Christy Comfort

3 Filer ID (Ethics Commission Filers)

4 Date

3/17/24

5 Full name of contributor

☐ out-of-state PAC (ID#)

Wayne Matthews

7 Amount of contribution (\$)

100.⁰⁰

6 Contributor address;

City;

State;

Zip Code

Lakeway, TX 78738

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/2/24

Full name of contributor

☐ out-of-state PAC (ID#)

Lauren Hackstedt

Amount of contribution (\$)

10.⁰⁰

Contributor address;

City;

State;

Zip Code

Lakeway, TX 78738

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

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: 5	
2 FILER NAME Christy Comfort		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 7314.07	
5 Date 2/23/24	6 Full name of contributor ☐ out-of-state PAC (ID#: Lake Travis Families PAC	8 Amount of Contribution \$ 905.50	9 In-kind contribution description yard signs
7 Contributor address; City; State; Zip Code [REDACTED], Austin, Tx 78701		☐ 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 2/27/24	Full name of contributor ☐ out-of-state PAC (ID#: Lake Travis Families PAC	Amount of Contribution \$ 800.00	In-kind contribution description t-shirts
Contributor address; City; State; Zip Code [REDACTED], Austin, Tx 78701		☐ 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 <i>Christy Comfort</i>				3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date <i>2/29/24</i>	6 Full name of contributor ☐ out-of-state PAC (ID#: <i>Lake Travis Families PAC</i>			8 Amount of Contribution \$ <i>216.50</i>	9 In-kind contribution description <i>Push cards</i>
7 Contributor address; City: State: Zip Code <i>[Redacted], Austin, Tx 78701</i>				☐ 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 <i>3/1/24</i>	Full name of contributor ☐ out-of-state PAC (ID#: <i>Lake Travis Families PAC</i>			Amount of Contribution \$ <i>908.30</i>	In-kind contribution description <i>Yard signs</i>
Contributor address; City: State: Zip Code <i>[Redacted], Austin, Tx 78701</i>				☐ 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 <i>Christy Comfort</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>3/3/24</i>	6 Full name of contributor ☐ out-of-state PAC (ID#: <i>Lake Travis Families PAC</i>	8 Amount of Contribution \$ <i>43.02</i>	9 In-kind contribution description <i>Grommets for yard signs</i>
7 Contributor address; City: State: Zip Code <i>Austin, Tx 78701</i>		☐ 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 <i>3/7/24</i>	Full name of contributor ☐ out-of-state PAC (ID#: <i>Lake Travis Families PAC</i>	Amount of Contribution \$ <i>20.00</i>	In-kind contribution description <i>Food + Bev exp at reception</i>
Contributor address; City: State: Zip Code <i>Austin, Tx 78701</i>		☐ 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

Christy Comfort

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

3/17/24

6 Full name of contributor

☐ out-of-state PAC (ID#:

Lake Travis Families PAC

7 Contributor address:

City:

State:

Zip Code

Austin, Tx 78701

8 Amount of Contribution \$

1196.25

9 In-kind contribution description

magazine advertisement

☐ 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

3/17/24

Full name of contributor

☐ out-of-state PAC (ID#:

Lake Travis Families PAC

Contributor address:

City:

State:

Zip Code

Austin, Tx 78701

Amount of Contribution \$

604.50

In-kind contribution description

Food / Bev / Rental Exp @ reception

☐ 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 Christy Comfort		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 3/19/24	6 Full name of contributor ☐ out-of-state PAC (ID#: Lake Travis Families PAC	8 Amount of Contribution \$ 100.00	9 In-kind contribution description Food + Bev Exp @ reception
7 Contributor address: City: State: Zip Code [Redacted] Austin, TX 78701		☐ 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 3/20/24	Full name of contributor ☐ out-of-state PAC (ID#: Lake Travis Families PAC	Amount of Contribution \$ 2500	In-kind contribution description Video Production
Contributor address: City: State: Zip Code [Redacted] Austin, TX 78701		☐ 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.			

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(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
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 F4: 4	2 FILER NAME Christy Comfort	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date 3/22/24	6 Payee name Stokes	
7 Amount (\$) 465.42	8 Payee address; City; State; Zip Code 1909 Ranch Rd 620, Suite C Austin, TX 78734	
9 TYPE OF EXPENDITURE	☒ Political ☐ Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Exp	(b) Description 100 yard signs
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/20/24	Payee name Stokes	
Amount (\$) 28.74	Payee address; City; State; Zip Code 1909 Ranch Rd 620, Suite C, Austin, TX 78734	
TYPE OF EXPENDITURE	☒ Political ☐ Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Exp	Description 1st yard sign
	☐ 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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(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
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 F4:	2 FILER NAME <i>Christy Comfort</i>	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date <i>3/16/24</i>	6 Payee name <i>Office Depot</i>	
7 Amount (\$) <i>119.04</i>	8 Payee address; City; State; Zip Code <i>12812 Shops at the Galleria Pkwy Austin, TX 78738</i>	
9 TYPE OF EXPENDITURE	☒ Political ☐ Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Exp</i>	(b) Description <i>Flyers - 250</i>
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>3/16/24</i>	Payee name <i>Home Depot</i>	
Amount (\$) <i>307.09</i>	Payee address; City; State; Zip Code <i>3600 Ranch Rd 6205, Bee Cave, TX 78738</i>	
TYPE OF EXPENDITURE	☒ Political ☐ Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Exp</i>	Description <i>6' + posts, hardware for street signs</i>
	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(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
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 F4: 2 FILER NAME Christy Comfort 3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD

\$

5 Date
3/6/24

6 Payee name
Stokes

7 Amount (\$)
1146.50

8 Payee address; City; State; Zip Code
1909 Ranch Rd 620, Suite C, Austin, TX 78734

9 TYPE OF EXPENDITURE

☒ Political

☐ Non-Political

10 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)

Advertising Exp

(b) Description

Street signs & grommets

(c) ☐ Check if travel outside of Texas. Complete Schedule T.

☐ Check if Austin, TX, officeholder living expense

11 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

Date
2/26/24

Payee name
Stokes

Amount (\$)
573.67

Payee address; City; State; Zip Code
1909 Ranch Rd 620, Suite C, Austin, TX 78734

TYPE OF EXPENDITURE

☒ Political

☐ Non-Political

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)

Advertising Exp

Description

Street 100 yard signs

☐ Check if travel outside of Texas. Complete Schedule T.

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(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
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 F4:		2 FILER NAME <i>Christy Comfort</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$	
5 Date		6 Payee name <i>Paypal</i>			
7 Amount (\$) <i>41.09</i>		8 Payee address; <i>2211 N 1st St. San Jose, CA</i>		City; State; Zip Code <i>95131</i>	
9 TYPE OF EXPENDITURE		☒ Political ☐ Non-Political			
10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <i>Fees</i>		(b) Description <i>Fees taken from Paypal from my donors</i>	
		(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
Amount (\$)		Office sought			
TYPE OF EXPENDITURE		Office held			
☐ Political ☐ Non-Political					
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description	
		☐ 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					

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:	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI			OFFICE USE ONLY	
	NICKNAME LAST SUFFIX				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			Date Received 04/26/24 1:10PM [Signature]
☐ Change of Address		[Redacted] Austin, Tx 78738			
5 CANDIDATE / OFFICEHOLDER PHONE		AREA CODE PHONE NUMBER EXTENSION			Date Hand-delivered or Date Postmarked 04/26/24
		[Redacted]			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI			Receipt # Amount \$	
	NICKNAME LAST SUFFIX				
7 CAMPAIGN TREASURER ADDRESS		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE			Date Processed 04/26/24
(Residence or Business)		[Redacted] Austin, Tx 78738			
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION			Date Imaged
		[Redacted]			
9 REPORT TYPE					
☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only) ☐ July 15 ☒ 8th day before election ☐ Exceeded Modified Reporting Limit ☐ Final Report (Attach C/OH - FR)					
10 PERIOD COVERED					
Month Day Year 3 / 26 / 24 THROUGH Month Day Year 4 / 24 / 24					
11 ELECTION					
ELECTION DATE: Month Day Year 5 / 4 / 24 ELECTION TYPE: ☐ Primary ☐ Runoff ☐ Other Description ☒ General ☐ Special					
12 OFFICE					
OFFICE HELD (if any)					
13 OFFICE SOUGHT (if known) School Trustee, Place 2					
14 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.					
COMMITTEE TYPE ☒ GENERAL ☐ SPECIFIC		COMMITTEE NAME Lake Travis Families PAC COMMITTEE ADDRESS [Redacted], Austin, Tx 78738 COMMITTEE CAMPAIGN TREASURER NAME Christian Alvarado COMMITTEE CAMPAIGN TREASURER ADDRESS [Redacted] Austin, Tx 78738			
☒ Additional Pages					

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

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)

\$

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

\$

6878.14

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$

4. TOTAL POLITICAL EXPENDITURES

\$

~~6878.14~~ 689.79

CONTRIBUTION
BALANCE

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

\$

OUTSTANDING
LOAN TOTALS

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

\$

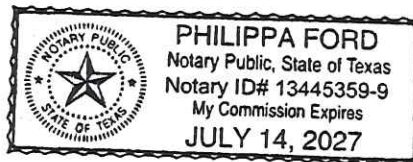
18 SIGNATURE

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.

Christy Comfort
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by CHRISTY COMFORT this the 26 day of APRIL,
20 24, to certify which, witness my hand and seal of office.

Philippa Ford
Signature of officer administering oath

PHILIPPA FORD
Printed name of officer administering oath

ACCOUNTANT
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

Christy Comfort

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 725. ⁰⁰
2.	☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 6153. ¹⁴
3.	☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	☐ SCHEDULE E: LOANS	\$ 22.91
5.	☒ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	☒ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 666. ⁸⁸
9.	☐ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	☐ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/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

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 <i>Christy Comfort</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4/21</i>	5 Full name of contributor ☐ out-of-state PAC (ID# _____) <i>Mike Azzarelli</i> 6 Contributor address; City; State; Zip Code [Redacted] <i>Dripping Springs</i> <i>78620</i>	7 Amount of contribution (\$) <i>25.00</i>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>4/3</i>	Full name of contributor ☐ out-of-state PAC (ID# _____) <i>Wayne Mathews</i> Contributor address; City; State; Zip Code [Redacted] <i>Lakeway, TX</i> <i>78734</i>	Amount of contribution (\$) <i>100.00</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/6</i>	Full name of contributor ☐ out-of-state PAC (ID# _____) <i>Robert Pearson</i> Contributor address; City; State; Zip Code [Redacted] <i>Austin TX</i> <i>78738</i>	Amount of contribution (\$) <i>500</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/2</i>	Full name of contributor ☐ out-of-state PAC (ID# _____) <i>Callie Kirkpatrick</i> Contributor address; City; State; Zip Code [Redacted] <i>Lakeway, TX</i> <i>78734</i>	Amount of contribution (\$) <i>100</i>
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:	
2 FILER NAME Christy Comfort		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 3/27	6 Full name of contributor ☐ out-of-state PAC (ID# _____) Lake Travis Families PAC	8 Amount of Contribution \$ 87.50	9 In-kind contribution description Food & Bev Event Expense
7 Contributor address; City; State; Zip Code Austin TX 78738		☐ 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 4/2	Full name of contributor ☐ out-of-state PAC (ID# _____) Lake Travis Families PAC	Amount of Contribution \$ 270.63	In-kind contribution description Door hangers + Push cards
Contributor address; City; State; Zip Code Austin TX 78738		☐ 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 <i>Christy Comfort</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>4/2</i>	6 Full name of contributor ☐ out-of-state PAC (ID#: <i>Lake Travis Families PAC</i>	8 Amount of Contribution \$ <i>750</i>	9 In-kind contribution description <i>Printed materials + advertisements</i>
7 Contributor address; City: State: Zip Code <i>[Redacted] Austin TX 78738</i>		☐ 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 <i>4/4</i>	Full name of contributor ☐ out-of-state PAC (ID#: <i>Lake Travis Families PAC</i>	Amount of Contribution \$ <i>100</i>	In-kind contribution description <i>Food + bev event expense</i>
Contributor address; City: State: Zip Code <i>[Redacted] Austin TX 78738</i>		☐ 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 <i>Christy Comfort</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>4/5</i>	6 Full name of contributor ☐ out-of-state PAC (ID#: <i>Lake Travis Families PAC</i>	8 Amount of Contribution \$ <i>500</i>	9 In-kind contribution description <i>Digital Advertising</i>
7 Contributor address; City; State; Zip Code <i>Austin</i> <i>TX</i> <i>78738</i>		☐ 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 <i>4/10</i>	Full name of contributor ☐ out-of-state PAC (ID#: <i>Lake Travis Families PAC</i>	Amount of Contribution \$ <i>1196.25</i>	In-kind contribution description <i>Magazine advertisement</i>
Contributor address; City; State; Zip Code <i>Austin TX</i> <i>78738</i>		☐ 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 <i>Christy Comfort</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>4/11</i>	6 Full name of contributor ☐ out-of-state PAC (ID#: <i>Lake Travis Families PAC</i>	8 Amount of Contribution \$ <i>125</i>	9 In-kind contribution description <i>Food + Bev event exp</i>
7 Contributor address: City: State: Zip Code <i>[Redacted], Austin, TX 78738</i>		☐ 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 <i>4/15</i>	Full name of contributor ☐ out-of-state PAC (ID#: <i>Lake Travis Families PAC</i>	Amount of Contribution \$ <i>154.24</i>	In-kind contribution description <i>Door hangers</i>
Contributor address: City: State: Zip Code <i>[Redacted], Austin TX 78738</i>		☐ 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

Christy Comfort

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

4/14

6 Full name of contributor

☐ out-of-state PAC (ID#)

Lake Travis Families PAC

7 Contributor address;

City;

State;

Zip Code

Austin, Tx 78738

8 Amount of Contribution \$

141.50

9 In-kind contribution description

Food + Bev event exp

☐ 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

4/18

Full name of contributor

☐ out-of-state PAC (ID#)

Lake Travis Families PAC

Contributor address;

City;

State;

Zip Code

Austin Tx 78738

Amount of Contribution \$

2500

In-kind contribution description

Video Production

☐ 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 <i>Christy Comfort</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>4/18</i>	6 Full name of contributor ☐ out-of-state PAC (ID#: <i>Lake Travis Families PAC</i>	8 Amount of Contribution \$ <i>75</i>	9 In-kind contribution description <i>Food + Bev event expense</i>
7 Contributor address; City; State; Zip Code <i>Austin, Tx 78738</i>		☐ 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	Full name of contributor ☐ out-of-state PAC (ID#: <i>[Signature]</i>	Amount of Contribution \$	In-kind contribution description
Contributor address; City; State; Zip Code		☐ 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 <i>Christy Comfort</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>4/23</i>	6 Full name of contributor ☐ out-of-state PAC (ID#: <i>Lake Travis Families PAC</i>	8 Amount of Contribution \$ <i>200</i>	9 In-kind contribution description <i>Food + Bev event exp</i>
7 Contributor address; City; State; Zip Code <i>[REDACTED] Austin TX 78738</i>		☐ 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 <i>4/24</i>	Full name of contributor ☐ out-of-state PAC (ID#: <i>Jodie Dover</i>	Amount of Contribution \$ <i>53</i>	In-kind contribution description <i>stamps</i>
Contributor address; City; State; Zip Code <i>[REDACTED] Lakeway, TX 78734</i>		☐ 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:	2 FILER NAME Christy Comfort	3 Filer ID (Ethics Commission Filers)
----------------------------	--	---------------------------------------

4 Date 4/21	5 Payee name Paypal
-----------------------	-------------------------------

6 Amount (\$) 1.21	7 Payee address; City; State; Zip Code 2211 N. St. San Jose CA 95131
------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Processing Fees for donor
	(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 4/21	Payee name
---------------------	------------

Amount (\$) 1.00	Payee address; City; State; Zip Code
----------------------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	☐ 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 4/21	Payee name
---------------------	------------

Amount (\$) 0.00	Payee address; City; State; Zip Code
----------------------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	☐ 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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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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 FILER NAME **Christy Comfort** 3 Filer ID (Ethics Commission Filers)

4 Date **4/6** 5 Payee name **Paypal**

6 Amount (\$) **14.94** 7 Payee address: City: State: Zip Code

2211 N. 1st St. San Jose CA 95131

8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) **Fees** (b) Description **Processing fees for donor**

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **4/3** Payee name **Paypal**

Amount (\$) **3.38** Payee address: City: State: Zip Code

2211 N 1st St San Jose CA 95131

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **Fees** Description **Processing fees for donor**

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **4/2** Payee name **Paypal**

Amount (\$) **3.38** Payee address: City: State: Zip Code

2211 N. St. San Jose CA 95131

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **Fees** Description **Processing fees for donor**

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME <u>Christy Comfort</u>		3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$
5 CREDIT CARD ISSUER	Name of financial institution <u>Amex</u>		
6 PAYMENT	(a) Amount Charged \$ <u>95.80</u>	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name <u>UPS</u>	(b) Payee address; City, State, Zip Code <u>2121 Lohmans Crossing Lakeway, TX 78734</u>	
8 PURPOSE OF EXPENDITURE ☒ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) <u>Printing Exp</u>		(b) Description <u>Postcards</u>
	(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 <u>[Signature]</u> Office Sought Office Held		
PAYMENT	(a) Amount Charged \$ <u>481.08</u>	(b) Date Expenditure Charged <u>4/12-4/22</u>	(c) Date(s) Credit Card Issuer Paid <u>4/12-4/22</u>
PAYEE	(a) Payee name <u>Facebook</u>	(b) Payee address; City, State, Zip Code <u>1 Hacker Way, Menlo Park, CA 94025</u>	
PURPOSE OF EXPENDITURE ☒ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) <u>Advertising</u>		(b) Description <u>Paid Ad</u>
	(c) ☐ 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		
PAYMENT	(a) Amount Charged \$ <u>90</u>	(b) Date Expenditure Charged <u>4/3</u>	(c) Date(s) Credit Card Issuer Paid <u>4/3</u>
PAYEE	(a) Payee name <u>Kerri Elliott T-shirts</u>	(b) Payee address; City, State, Zip Code <u>412 Hummingbird Ln, Austin TX 78734</u>	
PURPOSE OF EXPENDITURE ☒ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule)		(b) Description
	(c) ☐ 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

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 (Link to Commission Form)	
2. Total pages filed					
3. CANDIDATE / OFFICEHOLDER NAME		4. CANDIDATE / OFFICEHOLDER MAILING ADDRESS		OFFICE USE ONLY	
MS / MRS / MR: Mrs FIRST: Christy LAST: Comfort SUFFIX: B		ADDRESS / PO BOX: [REDACTED] CITY: Austin, TX 78738 STATE: TX ZIP CODE: 78738		Date Received: Date Forwarded: Date Hand-delivered or Date Postmarked: Receipt #: Amount \$: Date Processed: Date Shaped:	
5. CANDIDATE / OFFICEHOLDER PHONE		6. CAMPAIGN TREASURER NAME			
AREA CODE: [REDACTED] PHONE NUMBER: [REDACTED] EXTENSION: [REDACTED]		MS / MRS / MR: Mrs FIRST: Christy LAST: Comfort SUFFIX: B			
7. CAMPAIGN TREASURER ADDRESS		8. CAMPAIGN TREASURER PHONE			
STREET: [REDACTED] CITY: Austin, TX 78738 STATE: TX ZIP CODE: 78738		AREA CODE: [REDACTED] PHONE NUMBER: [REDACTED] EXTENSION: [REDACTED]			
9. REPORT TYPE					
☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign business appointment (Officeholder Only) ☐ July 15 ☐ 6th day before election ☐ Exceeded biennial reporting limit ☒ Final Report (Attach C/OH-112)					
10. PERIOD COVERED					
Month: 4 / Day: 25 / Year: 2024 THROUGH Month: 6 / Day: 30 / Year: 2024					
11. ELECTION					
ELECTION DATE: Month: 5 / Day: 4 / Year: 24 ELECTION TYPE: ☐ Primary ☐ Runoff ☐ Other Description: ☒ General ☐ Special					
12. OFFICE					
OFFICE HELD (if any):					
13. OFFICE BOUGHT (if known): School Trustee, Place 1					
14. 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 PERMIT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
☒ Additional Pages ☐ GENERAL ☐ SPECIFIC					
COMMITTEE TYPE: [REDACTED] COMMITTEE NAME: Law Family PAC COMMITTEE ADDRESS: [REDACTED] Austin, TX 78738 COMMITTEE CAMPAIGN TREASURER NAME: Christian Alvarado COMMITTEE CAMPAIGN TREASURER ADDRESS: [REDACTED] Austin, TX 78738					
GO TO PAGE 2					



CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

16 C/OH NAME

16 Filer ID (Ethics Commission Filing)

17 CONTRIBUTION
TOTALS1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR
CONTRIBUTIONS MADE ELECTRONICALLY)

\$ 0

EXPENDITURE
TOTALS2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 17,700.63

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 0

CONTRIBUTION
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$ 0

OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 0

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.

Christy Comfort
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Christy Comfort this 14th day of July

2024, to certify which, witness my hand and seal of office

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

(2) Unsworn Declaration

My name is Christy Comfort and my date of birth is [REDACTED]

My address is [REDACTED] Austin TX 78733 USA

(street) (city) (state) (zip code) (country)

Executed in Travis County, State of TX on the 14 day of July, 2024

Christy Comfort
Signature of Candidate/Officeholder (Declarant)

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised: 1/1/2024

**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 NAME

Christy Comfort

2. Filer ID (Texas Commission Filer)
3. SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

 Christy Comfort
Signature of Candidate / Officeholder

4. FILER WHO IS NOT AN OFFICEHOLDER

-- Complete A & B below only if you are not an officeholder. --

A. CAMPAIGN FUNDS

Check only one:

☒ I do not have unexpended contributions or unexpended interest or income earned from political contributions.

☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

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 political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

 Christy Comfort
Signature of Candidate

5. OFFICEHOLDER

-- Complete this section only if you are an officeholder --

☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19. FILER NAME

Christy Confort

20. Filer ID (E-Pace Commission Filer)

21. SCHEDULE SUBTOTALS
NAME OF SCHEDULESUBTOTAL
AMOUNT

1	☐ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2	☒ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 17,700.63
3	☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4	☐ SCHEDULE C: 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 CONTRIBUTIONS	\$
8	☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9	☐ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10	☐ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12	☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

Form provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 3/15/2024

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

Christy Comfort

3 Filer ID: (From Contribution Form)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

5

6 Date

4/3/24

7 Full name of contributor

Lake Travis Family P/K

Contributor address

Austin, TX 78738

City

State

Zip Code

8 Amount of Contribution \$

17,700.69

9 In-kind contribution description

Food materials, gift certificates, etc.

Check if event outside of Texas (Complete Schedule 3)

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

Full name of contributor

Contributor address

City

State

Zip Code

Amount of Contribution \$

In-kind contribution description

Check if event outside of Texas (Complete Schedule 3)

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.

Form provided by Texas Ethics Commission

don't attach state ID

Revised 1/1/2024



Philippa Ford <fordp@ltisdschools.org>

Campaign Finance Report Form C/OH

1 message

Philippa Ford <fordp@ltisdschools.org>

Tue, Jul 16, 2024 at 7:35 AM

To: Christy <christyforLT@gmail.com>

Received your copy of Campaign Finance Report.

Many thanks

A handwritten signature in cursive script that reads 'Philippa'.

Philippa Ford | District Accountant - Business Services

Email: fordp@ltisdschools.org | Phone: (512) 533 6013 | Fax: (512) 533 6002

Lake Travis ISD | 3322 Ranch Road 620 South | Austin, TX 78738

 Lake Travis ISD corporate logo



2024 Campaign Finance Reports - Christy Comfort (Final 07-15-24).pdf

452K