

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: 15
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: Dr. FIRST: Lauren MI: K NICKNAME: LAST: Tyra SUFFIX:	<div style="text-align: center; border: 2px solid red; padding: 10px; font-weight: bold; color: red; font-size: 1.2em;">RECEIVED</div> <div style="text-align: center; color: blue; font-size: 1.5em; font-weight: bold;">4/11/21</div> <div style="text-align: center; color: blue; font-size: 1.5em; font-weight: bold;">8</div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE: 4436 Avonshire Ln Plano, TX 75093		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE: PHONE NUMBER: EXTENSION: (469) 248-5143		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: Mr. FIRST: Christopher MI: N NICKNAME: LAST: Kline SUFFIX:		
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY, STATE: ZIP CODE: 1805 Grand Canyon Way Allen, TX 75002		
8 CAMPAIGN TREASURER PHONE	AREA CODE: PHONE NUMBER: EXTENSION: (214) 336-2460		
9 REPORT TYPE	<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 Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 02 / 08 / 2021 THROUGH 03 / 31 / 2021		
11 ELECTION	ELECTION DATE Month Day Year 05 / 01 / 2021	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special <u>2021 Municipal</u>	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Plano ISD Board of Trustees Place 1	
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME	COMMITTEE CAMPAIGN TREASURER ADDRESS
GO TO PAGE 2			

APR 11 10:02AM

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

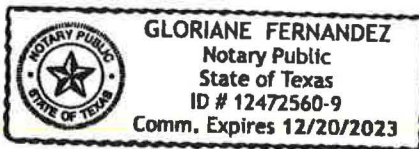
15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 15,410.81
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ 284.34
	4. TOTAL POLITICAL EXPENDITURES	\$ 8210.61
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$6,915.89
OUTSTANDING LOAN TOTALS	6. 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.

[Handwritten Signature]

Signature of Candidate or Officeholder

Please complete either option below:



(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Lauren K Tyra this the 15th day of April, 2021, to certify which, witness my hand and seal of office.

[Signature] Gloriane Fernandez Notary
Signature of officer administering oath Printed name of officer administering oath 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		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 15,410.84
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	\$ 8494.95
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

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: 7
2 FILER NAME Lauren Tyra		3 Filer ID (Ethics Commission Filers)
4 Date 2/13/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lauren Tyra	7 Amount of contribution (\$) 10.70
6 Contributor address; City; State; Zip Code 4436 Avonshire Lane Plano, Texas 75093		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jason Tyra	Amount of contribution (\$) 3.43
Contributor address; City; State; Zip Code 4436 Avonshire Lane Plano, Texas 75093		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dan Parsley	Amount of contribution (\$) 104.15
Contributor address; City; State; Zip Code 3218 Reba Drive Houston, Texas 77019		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clay Heighten	Amount of contribution (\$) 5192.42
Contributor address; City; State; Zip Code 6620 Golf Drive Dallas, Texas 75205		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

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. 7
2 FILER NAME Lauren Tyra		3 Filer ID (Ethics Commission Filers)
4 Date 2/14/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Natalie Lundsteen	7 Amount of contribution (\$) 52.23
	6 Contributor address; City; State; Zip Code 2516 Vintage Street Farmers Branch, Texas 75234	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ron Dickel	Amount of contribution (\$) 1038.73
	Contributor address; City; State; Zip Code 95 Church Street Los Gatos, CA 95030	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carl Soderstrom	Amount of contribution (\$) 5000.00
	Contributor address; City; State; Zip Code 6 Green Park Drive Dallas, Texas 75248	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Victoria Tyra	Amount of contribution (\$) 104.15
	Contributor address; City; State; Zip Code 3505 Misty Meadow Ln Argyle, Texas 76226	
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME Lauren Tyra		3 Filer ID (Ethics Commission Filers)
4 Date 2/14/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Diane Dickel	7 Amount of contribution (\$) 519.52
6 Contributor address; City; State; Zip Code 513 Lexington Ave El Cerrito, CA 94530		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/15/2021 3/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stephanie Hickey	Amount of contribution (\$) 104.46
Contributor address; City; State; Zip Code 827 Sunset Ln East Lansing, Michigan 48823		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marvin Dickel	Amount of contribution (\$) 519.52
Contributor address; City; State; Zip Code 402 Green Valley Drive Mount Pleasant, WI 53406		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sean McCaffity	Amount of contribution (\$) 104.15
Contributor address; City; State; Zip Code 3811 Turtle Creek Blvd Ste 1400 Dallas, TX 75219		
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME Lauren Tyra		3 Filer ID (Ethics Commission Filers)
4 Date 3/5/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark Rosensweig	7 Amount of contribution (\$) 104.15
6 Contributor address; City; State; Zip Code 616 Hinman Avenue Apt 3 Evanston, IL 60202		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steve Lavine	Amount of contribution (\$) 104.15
Contributor address; City; State; Zip Code 6212 Jacqueline Drive Plano, Texas 75024		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jannan Logan	Amount of contribution (\$) 52.23
Contributor address; City; State; Zip Code 4310 Cobblers Lane Dallas, Texas 75287		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lauren Doherty	Amount of contribution (\$) 52.23
Contributor address; City; State; Zip Code 713 Longwood Drive Allen, Texas 75013		
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME Lauren Tyra		3 Filer ID (Ethics Commission Filers)
4 Date 3/17/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christopher Kline	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 1805 Grand Canyon Way Allen, TX 75002		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Erica Johnson	Amount of contribution (\$) 52.23
Contributor address; City; State; Zip Code 5216 Edgewater Ct Parker, Texas 75094		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Courtney Hitt	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 6840 Rochelle Drive Plano, Texas 75023		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Matthew Russell	Amount of contribution (\$) 26.27
Contributor address; City; State; Zip Code 3256 Anchor Drive Plano, Texas 75023		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 7

2 FILER NAME

Lauren Tyra

3 Filer ID (Ethics Commission Filers)

4 Date
3/23/2021

5 Full name of contributor out-of-state PAC (ID# _____)
Helmut Kramer

7 Amount of contribution (\$)
78.19

6 Contributor address; City; State; Zip Code
11033 Snow White Dr Dallas, Texas 75229

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
3/27/2021

Full name of contributor out-of-state PAC (ID# _____)
Matt McCoy

Amount of contribution (\$)
10.70

Contributor address; City; State; Zip Code
3025 Friendswood Drive Arlington, Texas 76013

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
3/27/2021

Full name of contributor out-of-state PAC (ID# _____)
Robert and Janet Miller

Amount of contribution (\$)
52.23

Contributor address; City; State; Zip Code
2300 Westridge Drive Plano, Texas 75075

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
2/16/2021

Full name of contributor out-of-state PAC (ID# _____)
David and Margaret Dickel

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
1529 Sussex Drive Plano, Texas 75075

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME Lauren Tyra		3 Filer ID (Ethics Commission Filers)
4 Date 3/10/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mollie Hancock	7 Amount of contribution (\$) 50.00
6 Contributor address; City; State; Zip Code 3001 Princeton Dr Plano, Texas 75075		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jason and Lauren Tyra	Amount of contribution (\$) 1000.00
Contributor address; City; State; Zip Code 4436 Avonshire Lane Plano, Texas 75093		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bobby Ray	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 5945 Burgandy Plano, Texas 75093		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maricia Munden	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 4432 Avonshire Lane Plano, Texas 75093		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

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: 5	2 FILER NAME Lauren Tyra	3 Filer ID (Ethics Commission Filers)
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4 Date 2/22/2021	5 Payee name Texas Democratic Party
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6 Amount (\$) 370.00	Payee address; City; State; Zip Code 1106 Lavaca Suite 100 Austin, Texas 78701
---------------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule): Advertising Expense	(b) Description Voter data
	(c) <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> 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
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Date 2/23/2021	Payee name Executive Press
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Amount (\$) 3724.07	Payee address; City; State; Zip Code 1400 Presidential Dr #110 Richardson, Texas 75081
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule): Advertising Expense	Description Signs
	<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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Date Various	Payee name Squarespace
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Amount (\$) 56.30	Payee address; City; State; Zip Code Eight Clarkson Street 12th Floor New York, New York 10014
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule): Advertising Expense	Description Website hosting
	<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

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 | Food | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F-1: 5	2 FILER NAME Lauren Tyra	3 Filer ID (Ethics Commission Filers)
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4 Date Various	5 Payee name Zoom
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6 Amount (\$) 74.60	7 Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, California 95113
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> 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
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Date Various	Payee name Rev.com
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Amount (\$) 10.00	Payee address; City; State; Zip Code 1717 W. 6th Street Suite 310 Austin, Texas 78703
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Video Captions
	<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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Date 2/25/2021	Payee name Todos Digital
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Amount (\$) 2082.50	Payee address; City; State; Zip Code 3136 Westminster Ave Dallas, Texas 75025
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense Consulting	Description Website Consulting
	<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

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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5	2 FILER NAME Lauren Tyra	3 Filer ID (Ethics Commission Filers)
4 Date 3/11/2021	5 Payee name Todos Digital	
6 Amount (\$) 825.00	7 Payee address; City; State; Zip Code 3136 Westminster Ave Dallas, Texas 75025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule): Advertising Expense	(b) Description Campaign Literature
	(c) <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> 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 3/15/2021	Payee name MailChimp	
Amount (\$) 134.06	Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE Suite 5000 Atlanta, Georgia 30308	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule): Advertising Expense	Description Email
	<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 3/16/2021	Payee name Peerly	
Amount (\$) 359.82	Payee address; City; State; Zip Code 303 Williams Ave SW Suite 821 Huntsville, Alabama 35801	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule): Advertising Expense	Description Texting
	<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

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5	2 FILER NAME Lauren Tyra	3 Filer ID (Ethics Commission Filers)
4 Date Various	5 Payee name Donorbox	
6 Amount (\$) 34.96	7 Payee address; City; State; Zip Code 5 3rd Street Suite 900 San Francisco, California 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fundraising Expense	(b) Description Contribution Fees March
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 Various	Payee name Donorbox	
Amount (\$) 108.48	Payee address; City; State; Zip Code 5 3rd Street Suite 900 San Francisco, California 94103	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Contribution Fees February
	<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 2/14/2021	Payee name Donorbox	
Amount (\$) 228.77	Payee address; City; State; Zip Code 5 3rd Street Suite 900 San Francisco, California 94103	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Contribution Fees
	<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

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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5	2 FILER NAME Lauren Tyra	3 Filer ID (Ethics Commission Filers)
4 Date 2/14/2021	5 Payee name Donorbox	
6 Amount (\$) 220.30	7 Payee address; City; State; Zip Code 5 3rd Street Suite 900 San Francisco, California 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fundraising Expense	(b) Description Contribution Fees
	(c) <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> 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 3/25/2021	Payee name Dropbox	
Amount (\$) 12.78	Payee address; City; State; Zip Code 1800 Owens Street San Francisco, California 94158	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other - data storage	Description Data storage
	<input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/17/2021	Payee name Scooter Promo LLC dba DemSign	
Amount (\$) 253.31	Payee address; City; State; Zip Code 1401 Harvest Glen Dr Plano, Texas 75074	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Sign install
	<input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> 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