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:

OFFICE USE ONLY

Date Received: RECEIVED JUL 15 2025 By Sole

Date Hand-delivered or Date Postmarked

Receipt #

Amount $

Date Processed 7-15-25

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: Mrs
FIRST: Lauren
MI: J
NICKNAME:
LAST: White
SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
Change of Address

ADDRESS / PO BOX: [redacted]
APT / SUITE #:
CITY: Lakeway
STATE: TX
ZIP CODE: 78738

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE / PHONE NUMBER: [redacted]
EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: Mrs
FIRST: Anne
MI:
NICKNAME:
LAST: Bland
SUFFIX:

7 CAMPAIGN TREASURER ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): [redacted]
APT / SUITE #:
CITY: Austin
STATE: TX
ZIP CODE: 78738

8 CAMPAIGN TREASURER PHONE

AREA CODE / PHONE NUMBER: [redacted]
EXTENSION:

9 REPORT TYPE

- [ ] January 15
- [ ] 30th day before election
- [ ] Runoff
- [ ] 15th day after campaign treasurer appointment (Officeholder Only)
- [x] July 15
- [ ] 8th day before election
- [ ] Exceeded Modified Reporting Limit
- [ ] Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month 1 / Day 1 / Year 25 THROUGH Month 6 / Day 30 / Year 25

11 ELECTION

ELECTION DATE: Month 5 / Day 4 / Year 24

ELECTION TYPE:
- [ ] Primary
- [ ] Runoff
- [ ] Other Description
- [x] General
- [ ] Special

12 OFFICE

OFFICE HELD (if any): Lake Travis ISD Trustee, Place 2

13 OFFICE SOUGHT (if known): Lake Travis ISD Trustee, Place 2

14 NOTICE FROM POLITICAL COMMITTEE(S)
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
- [ ] GENERAL
- [ ] SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

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)
Lauren White	

17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$ 0.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 0.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$ 0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 89.94
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 4,014.13
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

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.

_____
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20 _____, 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

OR

(2) Unsworn Declaration

My name is Lauren White, and my date of birth is [redacted].

My address is [redacted], Lakeway, TX, 78738, USA.
(street) (city) (state) (zip code) (country)

Executed in Balearic Islands County, State of Spain, on the 15 day of July (month), 20 25 (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)
Lauren White	

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4.	SCHEDULE E: LOANS	$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 89.94
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	$ 0.85

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	2 FILER NAME Lauren White	3 Filer ID (Ethics Commission Filers)
4 Date 01/06/2025	5 Payee name Canva, Inc	
6 Amount ($) 14.99	7 Payee address; City; State; Zip Code 3312 E Caesar Chavez St Bdlg 1 Suite 1300 Austin TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Graphic Design
	(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 02/05/2025	Payee name Canva, Inc	
Amount ($) 14.99	Payee address; City; State; Zip Code 3312 E Caesar Chavez St Bdlg 1 Suite 1300 Austin TX 78702	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Graphic Design
	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 03/05/2025	Payee name Canva, Inc.	
Amount ($)	Payee address; City; State; Zip Code 3312 E Caesar Chavez St Bdlg 1 Suite 1300 Austin TX 78702	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Graphic Design
	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

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

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 K: 2

2 FILER NAME
Lauren White

3 Filer ID (Ethics Commission Filers)

4 Date	5 Name of person from whom amount is received / 6 Address of person from whom amount is received; City; State; Zip Code	8 Amount ($)
01/16/2025	Charles Swhwab, Inc. PO Box 982600 El Paso, TX 79998	0.16
	7 Purpose for which amount is received: bank interest Check if political contribution returned to filer	

Date	Name of person from whom amount is received / Address of person from whom amount is received; City; State; Zip Code	Amount ($)
02/18/2025	Charles Schwab, Inc PO Box 982600 El Paso, TX 79998	0.14
	Purpose for which amount is received: bank interest Check if political contribution returned to filer	

Date	Name of person from whom amount is received / Address of person from whom amount is received; City; State; Zip Code	Amount ($)
03/17/2025	Charles Schwab, Inc PO Box 982600 El Paso, TX 79998	0.13
	Purpose for which amount is received Check if political contribution returned to filer	

Date	Name of person from whom amount is received / Address of person from whom amount is received; City; State; Zip Code	Amount ($)
	Purpose for which amount is received Check if political contribution returned to filer	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED