CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

L					
Tł	ne C/OH Instruction C	Guide explains how to complete th	nis form. 1 Filer ID		2 Total pages filed: 24
3	CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIR Jus		MI ,	Date Received APR 0 7 2022
		NICKNAME LAS	ST apa	SUFFIX	By La Bergumin
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUI 2212 Racquet Club Ct.	ITE#; CITY;	ZIP CODE	Date Hand-delivered of Date Postmarked Receipt # Amount
	Change of Address	Arlington, TX 76017			Date Processed Date Imaged
L				,	Date inageu
5	CAMPAIGN TREASURER NAME	MS / MRS / MR FIR:		MI	
		NICKNAME LAS	Т	SUFFIX	
6	CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX 4111 Vista Creek Ct. Arlington, TX 76016	(PLEASE); APT	r/SUITE#; CITY;	STATE; ZIP CODE
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NU	JMBER EXTENSION		
8	REPORT ' TYPE		th day before election	Runoff Exceeded modified reporting limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9	PERIOD COVERED	Month Day Year 01/14/2022	THROUGH	Month Day 03/28/202	Year 2
10	ELECTION	ELECTION DATE Month Day Year 05/07/2022	Primary X General	ELECTION TYPE Runoff Special	Other
11	. OFFICE	OFFICE HELD (if any) Trustee, Place 5, Arlington ISD		12 OFFICE SOUGHT Trustee, Place 5, A	
		T E	GO TO PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

of 24

				2 of 24
13 C / OH NAME	Chapa, Justin		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to I officeholders are required to report this information	he candidate's or officeh	nolder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	i)	\$ 7,408.15
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 4,894.14
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LARIOD	AST DAY OF THE	\$ 44,084.52
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT	Lisa Ann Benjal Notary Public, State of Notary ID 1239757 My Commission Exp. 09-1	5-1 5-2025		be reported by me
AFFIX NO	TARY STAMP / SEAL ABO	DVE	./.	
Sworn to and subso	Sworn to and subscribed before me, by the said			
Lisor Un	in Beyanne	n Lisa Aan Benjamin Printed name of officer administering		to Supt.

SUBTOTALS - C/OH

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

3 of 24					3 of 24
18 FILER NAME Chapa, Justin					
		LE SUBTOTALS			
		SCHEDULE		SUBT	TOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	6,815.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	593.15
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	s	\$	4,652.87
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	·
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	241.27
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDUL	E A1
The Instruc	tion Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 1/10 Rpt: 4/24	
FILER NAME Chapa, Justir			3 Filer ID	
	5 Full name of contributor uut-of-state PAC (ID# Atkins, Cameron	:)	7 Amount of Contribution (\$)	\$50.00
	6 Contributor address; City; State; Zip Code Arlington, TX 76013			\$50.00
B Principal occup	ation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>	
Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)	
03/08/2022	Bader, Brian			\$500.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76012			
Principal occupation / Job title (See Instructions) Employer (See Instructions)			5)	
Date	Full name of contributor out-of-state PAC (ID#	:	Amount of Contribution (\$)	
02/01/2022	Bankhead, Elizabeth			\$50.00
	Contributor address; City; State; Zip Code Arlington, TX 76012			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Date 03/11/2022	Full name of contributor ut-of-state PAC (ID#		Amount of Contribution (\$)	\$100.00
]	Contributor address; City; State; Zip Code			,
Principal occup	Arlington, TX 76015 ation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
т типогран особар		2	,	
Date 02/01/2022	Full name of contributor ut-of-state PAC (ID#	:	Amount of Contribution (\$)	\$25.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76017			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions	(3)	
orms provided b	y Texas Ethics Commission www.ethi	cs.state.tx.us	Version V3.5	.1.fc88a75

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/10 Rpt: 5/24 2 FILER NAME 3 Filer ID Chapa, Justin 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 03/03/2022 Boatwright, Abigail \$25.00 Contributor address; City; State; Zip Code Fort Worth, TX 76112 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#:_ \$25.00 01/31/2022 Boatwright, Abigail Contributor address; City; State; Zip Code Fort Worth, TX 76112 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 03/06/2022 \$200.00 Brady, Eleanore and Charles Contributor address; City; State; Zip Code Arlington, TX 76001 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 03/11/2022 \$50.00 Brady, Leah Contributor address; City; State; Zip Code Arlington, TX 76013 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 01/18/2022 Brett, Holli \$50.00 Contributor address; City; State; Zip Code Pantego, TX 76013 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1		
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 3/10 Rpt: 6/24		
2 FILER NAME Chapa, Justin	3 Filer ID		
4 Date 01/31/2022 5 Full name of contributor out-of-state PAC (ID#:) Bridges, Linda 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$50.0		
Arlington, TX 76012			
B Principal occupation / Job title (See Instructions) 9 Employer (See Instructions	s)		
Date 01/25/2022 Full name of contributor out-of-state PAC (ID#:) Cumming, Michael Contributor address; City; State; Zip Code Arlington, TX 75248	Amount of Contribution (\$) \$250.0		
Principal occupation / Job title (See Instructions) Employer (See Instructions)	s)		
Date O2/03/2022 Full name of contributor out-of-state PAC (ID#:) Dominguez, Norma Contributor address; City; State; Zip Code	Amount of Contribution (\$) \$40.0		
Arlington, TX 76010 Principal occupation / Job title (See Instructions) Employer (See Instructions	<u> </u>		
Date Full name of contributor out-of-state PAC (ID#:) 03/03/2022 Elwood, Kacie Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$100.0		
Principal occupation / Job title (See Instructions) Employer (See Instructions)			
Date O3/06/2022 Full name of contributor out-of-state PAC (ID#:) Erlandsen, Kathy Contributor address; City; State; Zip Code Arlington, TX 76017	Amount of Contribution (\$) \$50.0		
Principal occupation / Job title (See Instructions) Employer (See Instructions)	<u> </u>		
forms provided by Texas Ethics Commission www.ethics.state.tx.us	Version V3.5.1.fc88a7		

MONET	ARY POLITICAL	CONTRIBUTIO	DNS		SCHEDUL	E A1
The Instruc	The Instruction Guide explains how to complete this form.			ı	I pages Schedule A1: : 4/10 Rpt: 7/24	
FILER NAME	FILER NAME		3 Filer	ID		
Chapa, Justir	1					
	5 Full name of contributor	out-of-state PAC (ID#:_)	7 Amo	unt of Contribution (\$)	
01/15/2022	Fernandez, Juan					\$100.00
	6 Contributor address; City; S					
	Arlington, TX 76013					
Principal occup	eation / Job title (See Instruction	s)	9 Employer (See Instructions	;)		
Date	Full name of contributor	out-of-state PAC (ID#:_		Amo	unt of Contribution (\$)	
03/06/2022 Fralicks, Jolie			unit of Continuation (C)	\$25.00		
	,	tate: Zin Code				
		ши, шр осио				
- 1						
	Pantego, TX 76013					
Principal occup	eation / Job title (See Instruction	s)	Employer (See Instructions	5)		
Date	Full name of contributor	out-of-state PAC (ID#:_		Amo	unt of Contribution (\$)	
03/08/2022	Griffin, Bobbie	_				\$100.00
ľ	Contributor address; City; S	tate; Zip Code				
	Arlington, TX 76013					
Principal occup	eation / Job title (See Instruction	s)	Employer (See Instructions)		
Date	Full name of contributor	out-of-state PAC (ID#:_		Amo	unt of Contribution (\$)	
01/31/2022	Hampton, Rashida	_				\$25.00
•	Contributor address; City; S	tate; Zip Code				
	Arlington, TX 76002					
Principal occup	eation / Job title (See Instruction	s)	Employer (See Instructions	;)		
Date	Full name of contributor	out-of-state PAC (ID#:_)	Amoi	unt of Contribution (\$)	
01/20/2022	Heinz, Erin	_			.,	\$200.00
ľ	Contributor address; City; State; Zip Code					
	Arlington, TX 76017					
Principal occup	ation / Job title (See Instruction	s)	Employer (See Instructions)		
			L			
orms provided b	y Texas Ethics Commission	www.ethic	s.state.tx.us		Version V3.5.	1.tc88a75

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/10 Rpt: 8/24 2 FILER NAME 3 Filer ID Chapa, Justin Date Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 03/09/2022 Hentz, Gloria (Dr.) \$350.00 Contributor address; City; State; Zip Code Kennedale, TX 76060 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/06/2022 Hissin, Sarah \$150.00 Contributor address; City; State; Zip Code Arlington, TX 76001 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/06/2022 Holland, Connie \$50.00 Contributor address; City; State; Zip Code Arlington, TX 76017 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/06/2022 Hopper, Sally \$50.00 Contributor address; City; State; Zip Code Arlington, TX 76016 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/06/2022 Johnson, Michael \$100.00 Contributor address; City; State; Zip Code Arlington, TX 76017 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.fc88a75c

MONET	ARY POLITICAL CONTRIBUTION	IS	SCHEDUL	E A1
The Instruc	tion Guide explains how to complete this for	m.	L Total pages Schedule A1: Sch: 6/10 Rpt: 9/24	
2 FILER NAME		;	Filer ID	
Chapa, Justi	1			
4 Date	5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$)	
01/31/2022	Kulesz, Lauren			\$50.00
	6 Contributor address; City; State; Zip Code	***************************************		
	Arlington, TX 76012			
Principal occur		Employer (See Instructions)		
r moipar occup	audity out the (occ instructions)	Employer (See mandonomy)		
Date	Full name of contributor		Amount of Contribution (\$)	
03/17/2022 Kulesz, Peggy			***	\$100.0
	Contributor address; City; State; Zip Code			
		1		
	Arlington, TX 76016			
Principal occup	oation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of Contribution (\$)	
03/14/2022	Lace, Laura			\$50.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76013			
Principal occup	oation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
01/29/2022	Lindley, Katrina			\$50.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76001			
Principal occup	nation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor ut-of-state PAC (ID#:		Amount of Contribution (\$)	
03/06/2022	Lowe, Heather			\$200.00
	Contributor address; City; State; Zip Code			
	Arlington TV 76016			
Principal occur	Arlington, TX 76016 ation / Job title (See Instructions)	Employer (See Instructions)		
		Zpioyer (See instructions)		
orms provided	by Texas Ethics Commission www.ethics.st	tate tv us	Version V3.5	1 600007

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULI	E A1	
	The Instru	uction Guide explains how to complete this form.			nl pages Schedule A1: n: 7/10 Rpt: 10/24	
2	FILER NAME Chapa, Justi	n		3 Filer	· ID	
4	Date 01/14/2022	5 Full name of contributor out-of-state PAC (ID#:) McCown, Donna 6 Contributor address; City; State; Zip Code Arlington, TX 76016		7 Amo	ount of Contribution (\$)	\$250.00
8	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 02/15/2022	Full name of contributor			ount of Contribution (\$)	\$25.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)						
	Date 03/21/2022	Full name of contributor out-of-state PAC (ID#:)	Amo	ount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			-
	Date 02/28/2022	Full name of contributor out-of-state PAC (ID#: Morse, Kelli Contributor address; City; State; Zip Code Lakewood Village, TX 75068)	Amo	ount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date Full name of contributor out-of-state PAC (ID#:) O3/15/2022 Ortiz, Daniel Contributor address; City; State; Zip Code 1304 W. Abram St. Suite 100 Arlington, TX 76013		Amo	ount of Contribution (\$)	\$100.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/10 Rpt: 11/24 2 FILER NAME 3 Filer ID Chapa, Justin Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 03/14/2022 Ortiz, Giana \$100.00 Contributor address; City; State; Zip Code Arlington, TX 76012 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/14/2022 Parra, Albert (Dr.) \$500.00 Contributor address; City; State; Zip Code Arlington, TX 76012 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/03/2022 Poole, Steven \$2,000.00 Contributor address; City; State; Zip Code Fort Worth, TX 76107 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/06/2022 Redmon, Jacque \$25.00 Contributor address; City; State; Zip Code Arlington, TX 76017 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 01/19/2022 Rodriguez, Lisa \$100.00 Contributor address; City; State; Zip Code Arlington, TX 90041 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.fc88a75c

MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHE	DULE A1
The Instru	The Instruction Guide explains how to complete this form.			A1:
2 FILER NAME	FILER NAME		3 Filer ID	
Chapa, Justi	n			
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution	(\$)
02/12/2022	Ross, Jared			\$150.00
	6 Contributor address; City; State; Zip Code			
	North Richland Hills, TX 76180			
3 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)	
Date	Full name of contributor out-of-state PAC (ID#:	1	Amount of Contribution	(\$)
03/05/2022	Ruby, Jennifer			\$25.00
	Contributor address; City; State; Zip Code		-	
	Arlington, TX 76013			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution	(\$)
01/31/2022	Swan, Mai			\$25.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76018			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of Contribution	(\$)
01/22/2022	Vasquez, Brooke			\$50.00
	Contributor address; City; State; Zip Code		 	
	Arlington, TX 76016			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution	(\$)
01/20/2022	Walters, Sarah and Kevin			\$50.00
	Contributor address; City; State; Zip Code			
Deigning	Arlington, TX 76016			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
orms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version	V3.5.1.fc88a75

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE	A1
F	The Instruction Guide explains how to complete this form.			1 Total pages S Sch: 10/10 F		
2	FILER NAME			3 Filer ID	<u> </u>	
1	Chapa, Just	n				
4	Date 01/28/2022	5 Full name of contributor)	7 Amount of Co		\$100.00
8	Principal occu	Arlington, TX 76016 pation / Job title (See Instructions)	Employer (See Instructions)		
Fo	rms provided	by Texas Ethics Commission www.ethics.s	state.tx.us		Version V3.5.1.f	c88a75c

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 14/24 2 FILER NAME 3 Filer ID Chapa, Justin \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution Date 6 Full name of contributor 8 Amount of out-of-state PAC (ID#: contribution (\$) description 03/11/2022 Beasley, Ruth \$93.15 Sign placement supplies Contributor address; City; State; Zip Code Arlington, TX 76016 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 Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 03/06/2022 Rutigliano, Tony \$500.001 Event fee, space, and Contributor address; City; State; Zip Code drinks for Campaign 403 E. Main St. Kickoff at Urban Alchemy Arlington, TX 76010 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)

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense
Gitt/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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 3 Filer ID	
	Sch: 1/8 Rpt: 15/24	Chapa, Justin	
4	Date	5 Payee name	
	03/21/2022	Amazon	_
6	Amount (\$) \$30.27	7 Payee address; City; State; Zip Code 440 Terry Ave. N.	
Ļ	DI INCO-	Seattle, WA 98109	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Zip-ties for signs	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Г	Date	Payee name	
ĺ	03/21/2022	Amazon	
Г	Amount (\$)	Payee address; City; State; Zip Code	
ĺ	\$9.19	440 Terry Ave. N.	
		Seattle, WA 98109	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, Complete Schedule I	_
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Zip-ties for signs	
Γ	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
H	Date	Payee name	
1	01/16/2022	Anedot, Inc.	
\vdash	Amount (\$)	Payee address; City; State; Zip Code	
	\$14.60	1340 Poydras St.	
	4-2 1144	Suite 1770	
		New Orleans, LA 70112	
\vdash	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
1	OF EXPENDITURE	Solicitation/Fundraising Expense	
	EN ENDITORE	Check if Austin, TX, officeholder living expense	
		Fees to online fundraising vendor	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	was are ided by Tayes F	Warrier VO 5 1 5000	_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) 3 Filer ID

1	Total pages Schedule F1:	
	Sch: 2/8 Rpt: 16/24	Chapa, Justin
4	Date 01/20/2022	5 Payee name Anedot, Inc.
6	Amount (\$) \$6.60	7 Payee address; City; State; Zip Code 1340 Poydras St. Suite 1770 New Orleans, LA 70112
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees to online fundraising vendor
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 01/22/2022	Payee name Anedot, Inc.
	Amount (\$) \$10.60	Payee address; City; State; Zip Code 1340 Poydras St. Suite 1770 New Orleans, LA 70112
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder tiving expense Fees to online fundraising vendor
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
ŀ	01/26/2022	Anedot, Inc.
	Amount (\$) \$10.30	Payee address; City; State; Zip Code 1340 Poydras St. Suite 1770 New Orleans, LA 70112
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees to online fundraising vendor
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
		thics Commission Wassian V2 5.1 fo@go75s

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to complete this f	orm.				
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID				
	Sch: 3/8 Rpt: 17/24	Chapa, Justin					
4	Date	5 Payee name					
	01/30/2022	Anedot, Inc.					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$6.60	1340 Poydras St.					
		Suite 1770					
		New Orleans, LA 70112					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	otion				
	OF EXPENDITURE	Solicitation/Fundraising Expense	k if travel outside of Texas. Complete Schedule T.				
		,	ik if Austin, TX, officeholder living expense O online fundraising vendor				
		1	o orimite randrationing vertices				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
ľ	expenditure to benefit C/O						
F	Date	Payee name					
	02/03/2022	Anedot, Inc.					
Н	Amount (\$)	Payee address; City; State; Zip Code					
	\$3.60	1340 Poydras St.					
	*****	Suite 1770					
		New Orleans, LA 70112					
	PURPOSE	T::	ntion				
	OF		k if travel outside of Texas. Complete Schedule T.				
EXPENDITURE Solicitation of an artist and Expense			Check if Austin, TX, officeholder living expense				
		Fees to online fundraising vendor					
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
L		<u> </u>					
	Date	Payee name					
L	02/05/2022	Anedot, Inc.					
l	Amount (\$)	Payee address; City; State; Zip Code					
	\$1.90	1340 Poydras St.					
		Suite 1770					
L		New Orleans, LA 70112					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)					
	EXPENDITURE		k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense				
		Fees	o online fundraising vendor				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
L	expenditure to benefit C/O	H					

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Feod/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 cate

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 4/8 Rpt: 18/24	Chapa, Justin
4	Date	5 Payee name
	02/13/2022	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6.30	1340 Poydras St.
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Ì		Fees to online fundraising vendor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/17/2022	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.30	1340 Poydras St.
		Suite 1770
		New Orleans, LA 70112
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fees to online fundraising vendor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/01/2022	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.30	1340 Poydras St.
		Suite 1770
		New Orleans, LA 70112
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fees to online fundraising vendor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID
	Sch: 5/8 Rpt: 19/24	Chapa, Justin
4	Date	5 Payee name
	03/05/2022	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
ŀ	\$85.90	1340 Poydras St.
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Fees to online fundraising vendor
		rees to offinite fundraising vention
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	03/07/2022	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$23.10	1340 Poydras St.
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense
		Fees to online fundraising vendor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/09/2022	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$26.90	1340 Poydras St.
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense
		Fees to online fundraising vendor
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
┢	·	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Codd Codd Benealed

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

l	Credit Card Payment	The Instruction Guide explains how to con	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID
	Sch: 6/8 Rpt: 20/24	Chapa, Justin		
4	Date	5 Payee name		
l	03/11/2022	Anedot, Inc.		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	ie	
	\$14.30	1340 Poydras St.		
		Suite 1770		
		New Orleans, LA 70112		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Solicitation/Fundraising Expense		Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE			Check if Austin, TX, officeholder living expense
				Fees to online fundraising vendor
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/O		ji it	Onice neid
H	Date	Payee name		
ŀ	03/13/2022	Anedot, Inc.		
L		<u>'</u>	J.,	
	Amount (\$) \$6.60	Payee address; City; State; Zip Coo	æ	
	\$0.00	1340 Poydras St.		
		Suite 1770		
		New Orleans, LA 70112		
	PURPOSE OF	,,,	(b)	Description
	EXPENDITURE	Solicitation/Fundraising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Fees to online fundraising vendor
				-
Г	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/O	H		
F	Date	Payee name		
	03/15/2022	Anedot, Inc.		
Г	Amount (\$)	Payee address; City; State; Zip Coo	de	
l	\$26.90	1340 Poydras St.		
		Suite 1770		
		New Orleans, LA 70112		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Solicitation/Fundraising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense
				Fees to online fundraising vendor
-	Complete ONLY if direct	Candidate/Officeholder name Office soug	tht	Office held
	expenditure to benefit C/OI		91 IL	Onice field
-				

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to comp	escentiaer Labor OTHER (effer a category not issee above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID
	Sch: 7/8 Rpt: 21/24	Chapa, Justin	
4	Date	5 Payee name	
	03/17/2022	Anedot, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$4.30	1340 Poydras St.	
		Suite 1770	
		New Orleans, LA 70112	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)) Description
	OF	Solicitation/Fundraising Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Fees to online fundraising vendor
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held
	expenditure to benefit C/Oi	7	
	Date	Payee name	
	03/19/2022	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.30	1340 Poydras St.	
		Suite 1770	
		New Orleans, LA 70112	
_	PURPOSE) Description
	OF	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Solicitation in analysing Expense	Check if Austin, TX, officeholder living expense
			Fees to online fundraising vendor
	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
	expenditure to benefit C/OI	H	
	Date	Payee name	
	03/28/2022	Arlington Today Magazine	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3,000.00	P.O. Box 170539	
		Arlington, TX 76003-0539	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)) Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE		Check if Austin, TX, officeholder living expense
			Insert cards
	0	0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held
_	• • • • • • • • • • • • • • • • • • • •		
20	ms provided by Tayas F	thics Commission www.athics state ty us	Version V2 5 1 fe00a756

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	al Co		Legal Services The Instruction G	uide explains l			s/Contract Labor ete this form.	OTHER	R (enter a category not	listed above)
1	Total pages Schedule F1:	2	FILER NAME		_			3	Filer I	D	
	Sch: 8/8 Rpt: 22/24	_	Chapa, Just								
4	Date	5	Payee name					•			
	03/06/2022		Awesome C	atering DFW							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode				
	\$900.00		2205 W. Div	rision St.							
i		1	Suite A3								
			Arlington, T	X 76012							
8	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Food/Bevera	age Expense				<u> </u>		xas. Complete Schedu	le T.
		l						Check if Austin, TX			
								Food for Campa	algii i	ick-on	
9	Complete ONLY if direct	Ļ	`andidato/Offic	ceholder name		Office sou	laht.			Office held	
]	expenditure to benefit C/OI		Januluale/Onic	centituel name		Juice Sou	ıgııı		C	mice neiu	
_	Date	Т	Payee name					-		-	
	02/04/2022		•	e Lane Design							
-	Amount (\$)	H	Payee addres	 	State:	Zip Co	nde			<u>-</u>	
	\$144.00		800 Shadyc	•	Juic,	Zip Oc	Juc				
	φ144.00		ooo Shaaye	icek Ct.							
			Aulinasau T	v 70040							
			Arlington, T	X 76013							
	PURPOSE OF	(a)	Category (Se	e Categories listed at t	he top of this sch	edule)	(b)	Description			
	EXPENDITURE		Consulting E	Expense						xas. Complete Schedu	le T.
								Website design		lder living expense	anco conjecc
								website design	, upua	te, and mainter	iance services
_	Complete ONLY if direct	۲,	Candidate/Offic	ceholder name	-	Office sou	<u>l</u> ıght		C	Office held	-
	expenditure to benefit C/OI	Н					<u>.</u>				
	Date		Payee name								
	03/21/2022		Tractor Sup	ply Company							
	Amount (\$)	Π	Payee addres	ss; City;	State;	Zip Co	ode				
	\$313.01		1550 N. Hig	hway 157							
			Mansfield, T	X 76063							
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sch	edule)	(b)	Description			
	OF EXPENDITURE	ĺ	Advertising					_		xas. Complete Schedu	le T.
								Check if Austin, TX			
								Sign posts and	materi	ais	
	Complete ONLY if direct	۲	Candidate/Offic	ceholder name		Office sou	laht Iaht			Office held	
	expenditure to benefit C/O			January Huma		300	-9·''			u	
			-						-		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District Consulting Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: FILER NAME 3 Filer ID Sch: 1/2 Rpt: 23/24 Chapa, Justin Date Payee name 03/23/2022 El Gabacho Payee address; City; State; Zip Code Amount (\$) 2408 W. Abram St. \$135.80 Reimbursement from political contributions intended Arlington, TX 76013 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Food for post-forum debrief with campaign supporters and volunteers Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name Meta Platforms, Inc. 03/11/2022 Amount (\$) Payee address; City; State; Zip Code \$20.00 One Hacker Way Reimbursement from political contributions intended $|\mathbf{x}|$ Menlo Park, CA 94025 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Accounting/Banking **EXPENDITURE** Sponsored Facebook post Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Meta Platforms, Inc. 03/26/2022 Payee address; State; Zip Code Amount (\$) City; \$45.00 One Hacker Way Reimbursement from political contributions intended M Menlo Park, CA 94025 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Accounting/Banking **EXPENDITURE** Sponsored Facebook posts

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit

C/OH

Office sought

Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Adventising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment			Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule G:	2 FILER NAM				3 Filer ID	
	Sch: 2/2 Rpt: 24/24	Chapa, Jus	_				
4	Date	5 Payee name)				
	03/22/2022	Shell Statio	on				
6	Amount (\$)	7 Payee addre	ess; City; State	; Zip C	ode		
	\$14.73	2430 N. Fie	elder Rd.				
	Reimbursement from political contributions intended	Arlington, 1	TX 76012				
8	PURPOSE	(a) Category (s	See Categories listed at the top of this sc	hedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Food/Beve	rage Expense		[Check if Austin, TX, officeholder living expense	
					Gloves and drink	s for sign deployment	
Ļ	On the Carlot Ca		I I.I.		1		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought	Office held	
	Date	Payee name	<u> </u>		····		
	03/21/2022	Westlake A	CE Hardware				
	Amount (\$)	Payee addre	ess; City; State	; Zip C	ode		
	\$12.87	1705 W. Pa	ark Row Dr.				
	Reimbursement from						
	x political contributions intended	Arlington, 1	TX 76013				
	PURPOSE	Category (s	See Categories listed at the top of this sc	hedule)	Description	Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Advertising	Expense		[Check if Austin, TX, officeholder living expense	
	LAI ENDITORE				Supplies for sign	deployment	
	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought	Office held	
	C/OH						
	Date	Payee name					
	03/21/2022	1 -	CE Hardware				
_					-		
	Amount (\$)	Payee addre		e; Zip Ci	ode		
	\$12.87	1705 W. Pa	ark Row Dr.				
	Reimbursement from political contributions intended	Arlington, 7	TX 76013				
	PURPOSE	Category (s	see Categories listed at the top of this sci	nadula)	Description	Check if travel outside of Texas. Complete Schedule T.	
	OF	Advertising	-	icauic)		Check if Austin, TX, officeholder living expense	
	EXPENDITURE	, .a.voio.i.ig	Experies		Supplies for sign	deployment	
	Complete ONLY if direct	Candidate/Office	holder name		Office sought	Office held	
	expenditure to benefit		-			200	
	C/OH						