

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) 00090825		2 Total pages filed: 22	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Jose Noe		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/12/2022		
	NICKNAME LAST SUFFIX Elias				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 304 Kemp Austin, TX 78741			Date Hand-delivered or Date Postmarked	
				Receipt #	Amount
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Susana R.				
	NICKNAME LAST SUFFIX Almanza				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 6103 Larch Terrace Austin, TX 78741				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 770-7896				
8 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)				
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/01/2022 09/29/2022				
10 ELECTION	ELECTION DATE Month Day Year 11/08/2022		ELECTION TYPE		
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) Council Member, District 3 Place Austin District District 3 Travis		12 OFFICE SOUGHT (if known) Council Member, District 3 Place Austin District District 3		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME	Elias, Jose Noe	14 Filer ID	(Ethics Commission Filers)
		00090825	

15 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. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,309.20
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,077.27
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 6,404.45
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFADAVIT

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.

Jose Noe Elias

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering Printed name of officer administering Title of officer administering oath

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

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18 FILER NAME Elias, Jose Noe		19 Filer ID (Ethics Commission Filers) 00090825
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,309.20
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 FROM POLITICAL CONTRIBUTIONS	\$ 2,077.27
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/12 Rpt: 4/22
2 FILER NAME Elias, Jose Noe		3 Filer ID (Ethics Commission Filers) 00090825
4 Date 07/02/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neill, Karen <hr/> 6 Contributor address; City; State; Zip Code 56 N. Maple Hadley, MA 01035	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) Mass Commonwealth
Date 09/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almanza, Librado <hr/> Contributor address; City; State; Zip Code 6103 Larch Terrace Austin, TX 78741	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Media Technician		Employer (See Instructions) ACC
Date 08/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almanza, Susana <hr/> Contributor address; City; State; Zip Code 6103 Larch Terrace Austin, TX 78741	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) PODER
Date 09/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almanza, Susana <hr/> Contributor address; City; State; Zip Code 6103 Larch Terrace Austin, TX 78741	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) PODER
Date 09/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber, Elaine M. <hr/> Contributor address; City; State; Zip Code 902 Gardner Road #21 Austin, TX 78721	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/12 Rpt: 5/22
2 FILER NAME Elias, Jose Noe		3 Filer ID (Ethics Commission Filers) 00090825
4 Date 09/20/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrera, Carmen 6 Contributor address; City; State; Zip Code P O Box 150891 Austin, TX 78715	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) Austin AISD
Date 07/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bos, Andrea Contributor address; City; State; Zip Code 724 Eventide Drive San Antonio, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Unemployed
Date 07/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunch, Bill Contributor address; City; State; Zip Code 1307 Oxford Ave Austin, TX 78704	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) SOS Alliance
Date 07/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castro, Damaris Contributor address; City; State; Zip Code 6109 Felix Austin, TX 78741	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Pharmacy Technician		Employer (See Instructions) HEB
Date 08/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castro, Damaris Contributor address; City; State; Zip Code 6109 Felix Austin, TX 78741	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Pharmacy Technician		Employer (See Instructions) HEB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/12 Rpt: 6/22
2 FILER NAME Elias, Jose Noe		3 Filer ID (Ethics Commission Filers) 00090825
4 Date 09/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castro, Damaris <hr/> 6 Contributor address; City; State; Zip Code 6109 Felix Austin, TX 78741	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Pharmacy Technician		9 Employer (See Instructions) HEB
Date 08/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castro, Jose M <hr/> Contributor address; City; State; Zip Code 6109 Felix Austin, TX 78741	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) None
Date 09/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chotzinoff, Robin <hr/> Contributor address; City; State; Zip Code 6015 Ponca Unit D Austin, TX 78741	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Writer general contractor		Employer (See Instructions) Self
Date 09/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coke, Alex <hr/> Contributor address; City; State; Zip Code 2403 Shoalmont Drive Austin, TX 78756	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self
Date 09/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cudjo, James <hr/> Contributor address; City; State; Zip Code 8400 Jamestown Dr A Austin, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/12 Rpt: 7/22
2 FILER NAME Elias, Jose Noe		3 Filer ID (Ethics Commission Filers) 00090825
4 Date 09/04/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudd, Adam <hr/> 6 Contributor address; City; State; Zip Code 6808 Montana Austin, TX 78741	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Art Director		9 Employer (See Instructions) Keller Williams
Date 09/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elias, Altagracia <hr/> Contributor address; City; State; Zip Code 4406 Revere Road Austin, TX 78741	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Housing Cleaning		Employer (See Instructions) Self
Date 09/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elias, Santos <hr/> Contributor address; City; State; Zip Code 5603 Tallow Tree Austin, TX 78744	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elias-Hernandez, Benjamin <hr/> Contributor address; City; State; Zip Code 10101 West Parmer Ln #1315 Austin, TX 78717	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) Egg Roll Express
Date 08/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Valerie <hr/> Contributor address; City; State; Zip Code 1211 Ravine Drive Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/12 Rpt: 8/22
2 FILER NAME Elias, Jose Noe		3 Filer ID (Ethics Commission Filers) 00090825
4 Date 07/02/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Xavier <hr/> 6 Contributor address; City; State; Zip Code 14021 Maricella Lane Pflugerville, TX 78660	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Research Analyst		9 Employer (See Instructions) PODER
Date 08/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Jr, Xavier <hr/> Contributor address; City; State; Zip Code 14021 Maricella Lane Pflugerville, TX 78660	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Research Analyst		Employer (See Instructions) PODER
Date 09/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Jr, Xavier <hr/> Contributor address; City; State; Zip Code 14021 Maricella Lane Pflugerville, TX 78660	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Research Analyst		Employer (See Instructions) PODER
Date 09/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Jr, Xavier <hr/> Contributor address; City; State; Zip Code 14021 Maricella Lane Pflugerville, TX 78660	Amount of Contribution (\$) \$4.20
Principal occupation / Job title (See Instructions) Research Analyst		Employer (See Instructions) PODER
Date 09/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hovis, Theresa <hr/> Contributor address; City; State; Zip Code 1201 Grove Blvd #401 Austin, TX 78741	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/12 Rpt: 9/22
2 FILER NAME Elias, Jose Noe		3 Filer ID (Ethics Commission Filers) 00090825
4 Date 09/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingle, Mary <hr/> 6 Contributor address; City; State; Zip Code 3406 Duval Street Austin, TX 78705	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Designer		9 Employer (See Instructions) Self employed
Date 07/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Dominique <hr/> Contributor address; City; State; Zip Code 642 Saint Charles Drive Arlington, TX 76013	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Cook		Employer (See Instructions) Panda Express
Date 09/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, David <hr/> Contributor address; City; State; Zip Code 1808 Kerr Austin, TX 78704	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) None
Date 09/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lusardi, Anthony <hr/> Contributor address; City; State; Zip Code 4807 Alf Apt A Austin, TX 78721	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Developer Advocate		Employer (See Instructions) Wix
Date 08/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manor, Cynthia <hr/> Contributor address; City; State; Zip Code 6601-B Santos Street Austin, TX 78741	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/12 Rpt: 10/22
2 FILER NAME Elias, Jose Noe		3 Filer ID (Ethics Commission Filers) 00090825
4 Date 08/07/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McArthur, Babara <hr/> 6 Contributor address; City; State; Zip Code 5700 Clay Avenue Austin, TX 78756	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Astronomer -semi-retired		9 Employer (See Instructions) UT
Date 08/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckiernan, John <hr/> Contributor address; City; State; Zip Code 3000 Matador Drive Austin, TX 78741	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) UT Austin
Date 09/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckiernan, John <hr/> Contributor address; City; State; Zip Code 3000 Matador Drive Austin, TX 78741	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) UT Austin
Date 07/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meisenbach, Albert <hr/> Contributor address; City; State; Zip Code 1800 San Gabriel Austin, TX 78702	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meisenbach, Megan (Ms.) <hr/> Contributor address; City; State; Zip Code 1800 San Gabriel Austin, TX 78702	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/12 Rpt: 11/22
2 FILER NAME Elias, Jose Noe		3 Filer ID (Ethics Commission Filers) 00090825
4 Date 09/28/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merriam, Rosemary <hr/> 6 Contributor address; City; State; Zip Code 800 West Lynn Austin, TX 78703	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 09/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montoya, Melinda <hr/> Contributor address; City; State; Zip Code 910 Koerner Lane Austin, TX 78721	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) AISD
Date 09/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Motwani, Amit <hr/> Contributor address; City; State; Zip Code 915 Valdez Austin, TX 78741	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Nonprofit Mgmt		Employer (See Instructions) Rupani Foundation
Date 09/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nudo, Dominic <hr/> Contributor address; City; State; Zip Code 61 Dunbarton Ct San Ramon, CA 94583	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 08/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paulus, Eric <hr/> Contributor address; City; State; Zip Code 1201 Grove Blvd Apt 9 Austin, TX 78741	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Land Manager		Employer (See Instructions) Ecology Action of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/12 Rpt: 12/22
2 FILER NAME Elias, Jose Noe		3 Filer ID (Ethics Commission Filers) 00090825
4 Date 09/22/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pillai, Jayan <hr/> 6 Contributor address; City; State; Zip Code 2303 Titania Austin, TX 78741	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) AISD
Date 08/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pittala, Anna <hr/> Contributor address; City; State; Zip Code 4501 Jinx Avenue Austin, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 07/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Puerta, Faith <hr/> Contributor address; City; State; Zip Code 1339 Wet Theo Ave San Antonio, TX 78225	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Customer Service		Employer (See Instructions) HEB
Date 09/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Rosa <hr/> Contributor address; City; State; Zip Code 17202 B Leafroller Drive Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) AISD
Date 08/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reck, Caroline E <hr/> Contributor address; City; State; Zip Code 1119 Omega Ave Austin, TX 78721	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Puppeteer/adjunct instructor		Employer (See Instructions) Self/ACC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/12 Rpt: 13/22
2 FILER NAME Elias, Jose Noe		3 Filer ID (Ethics Commission Filers) 00090825
4 Date 09/13/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rizo, Miguel <hr/> 6 Contributor address; City; State; Zip Code 9005 Anna Street Austin, TX 78748	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) AISD
Date 07/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Dylan <hr/> Contributor address; City; State; Zip Code 1619 Willow Austin, TX 78702	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Design		Employer (See Instructions) dcrain
Date 08/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roche, Kim <hr/> Contributor address; City; State; Zip Code 802 Long Bow Ln Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Dog Trainer		Employer (See Instructions) Self
Date 09/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santis, Rosa <hr/> Contributor address; City; State; Zip Code 2311 Enfield Road Austin, TX 78703	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Pedro SS Service
Date 07/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithe, Amy <hr/> Contributor address; City; State; Zip Code 6003 Pona Austin, TX 78741	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/12 Rpt: 14/22
2 FILER NAME Elias, Jose Noe		3 Filer ID (Ethics Commission Filers) 00090825
4 Date 07/14/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithe, Amy <hr/> 6 Contributor address; City; State; Zip Code 6003 Pona Austin, TX 78741	7 Amount of Contribution (\$) \$80.00
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Unemployed
Date 07/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soto, Adam <hr/> Contributor address; City; State; Zip Code 6015 Ponce Unit C Austin, TX 78741	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Griffin School
Date 09/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Dustin <hr/> Contributor address; City; State; Zip Code 6203 Walker Lane Austin, TX 78741	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Central Health
Date 08/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weil, Lewis <hr/> Contributor address; City; State; Zip Code 7503 Brookhollow Drive Austin, TX 78752	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Financial Planner		Employer (See Instructions) Money Positive
Date 09/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Jaynice <hr/> Contributor address; City; State; Zip Code 3414 Ave P1/2 Galveston, TX 77550	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Sentry Health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/12 Rpt: 15/22
2 FILER NAME Elias, Jose Noe		3 Filer ID (Ethics Commission Filers) 00090825
4 Date 08/30/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Jodie <hr/> 6 Contributor address; City; State; Zip Code 4620W. William Cannon #3 Austin, TX 78749	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) AISD
Date 09/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanez, Brenda <hr/> Contributor address; City; State; Zip Code 2208 Johnson Dr Granite Shoals, TX 78654	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PSR		Employer (See Instructions) DCA
Date 07/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanez, Debora <hr/> Contributor address; City; State; Zip Code 2208 Johnson Drive Granite Shoal, TX 78654	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Blue Bonnet Cafe
Date 09/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanez, Fidel <hr/> Contributor address; City; State; Zip Code 5603 Tallow Tree Austin, TX 78744	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Food Service		Employer (See Instructions) St. David's Medical Center

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

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: Sch: 1/7 Rpt: 16/22	2 FILER NAME Elias, Jose Noe	3 Filer ID (Ethics Commission Filers) 00090825
4 Date 07/07/2022	5 Payee name ActBlue Civics	
6 Amount (\$) \$58.63	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Donation Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/05/2022	Candidate/Officeholder name Office sought Office held	
Payee name ActBlue Civics		
Amount (\$) \$7.76	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Fee Donations
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/06/2022	Candidate/Officeholder name Office sought Office held	
Payee name ActBlue Civics		
Amount (\$) \$10.17	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

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: Sch: 2/7 Rpt: 17/22	2 FILER NAME Elias, Jose Noe	3 Filer ID (Ethics Commission Filers) 00090825
4 Date 09/09/2022	5 Payee name ActBlue Civics	
6 Amount (\$) \$22.21	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/24/2022	Payee name ActBlue Civics	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/22/2022	Payee name Best Buy	
Amount (\$) \$67.33	Payee address; City; State; Zip Code 1201 Barbara Jordan #100 Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printer Ink
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

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: Sch: 3/7 Rpt: 18/22	2 FILER NAME Elias, Jose Noe	3 Filer ID (Ethics Commission Filers) 00090825
4 Date 09/21/2022	5 Payee name Bobby Creek Farm	
6 Amount (\$) \$29.10	7 Payee address; City; State; Zip Code 3414 Lyons Rd Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Snacks
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/05/2022	Candidate/Officeholder name Chicanas Read	
Amount (\$) \$339.91	Payee address; City; State; Zip Code 4102 Yosemite Street Cedar Park, TX 78613	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing for T-Shirts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/17/2022	Candidate/Officeholder name Dollar General	
Amount (\$) \$6.33	Payee address; City; State; Zip Code 6010 E. Riverside Dr Austin, TX 78741	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poster Board
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

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: Sch: 4/7 Rpt: 19/22	2 FILER NAME Elias, Jose Noe	3 Filer ID (Ethics Commission Filers) 00090825
4 Date 08/11/2022	5 Payee name HEB	
6 Amount (\$) \$10.00	7 Payee address; City; State; Zip Code 2110 W. Slaughter Lane Austin, TX 78748	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Labels	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Address Labels
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2022	Payee name HEB	
Amount (\$) \$21.17	Payee address; City; State; Zip Code 2508 E. Riverside Drive Austin, TX 78741	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Address Labels
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/24/2022	Payee name HEB	
Amount (\$) \$29.35	Payee address; City; State; Zip Code 2508 E. Riverside Drive Austin, TX 78741	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labels
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

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: Sch: 5/7 Rpt: 20/22	2 FILER NAME Elias, Jose Noe	3 Filer ID (Ethics Commission Filers) 00090825
4 Date 08/05/2022	5 Payee name Office Depot	
6 Amount (\$) \$23.38	7 Payee address; City; State; Zip Code 816 Tirado Austin, TX 78752	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Copies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/10/2022	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$11.69	Payee name Office Depot Payee address; City; State; Zip Code 816 Tirado Austin, TX 78752	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Copies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/26/2022	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$34.83	Payee name Office Depot Payee address; City; State; Zip Code 2101 S. Lamar Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Copies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

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: Sch: 6/7 Rpt: 21/22	2 FILER NAME Elias, Jose Noe	3 Filer ID (Ethics Commission Filers) 00090825
4 Date 08/08/2022	5 Payee name Signrocket.com	
6 Amount (\$) \$820.00	7 Payee address; City; State; Zip Code 340 Broadway Ave St Pau, MN 55071	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/11/2022	Payee name Signrocket.com	
Amount (\$) \$40.00	Payee address; City; State; Zip Code 340 Broadway Ave St Paul, MN 55071	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Sign
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2022	Payee name Sir Speedy Printing	
Amount (\$) \$71.13	Payee address; City; State; Zip Code 600 Congress Ave Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

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: Sch: 7/7 Rpt: 22/22	2 FILER NAME Elias, Jose Noe	3 Filer ID (Ethics Commission Filers) 00090825
4 Date 07/17/2022	5 Payee name Triaz Printing	
6 Amount (\$) \$174.28	7 Payee address; City; State; Zip Code 2013 Wells Branch Pkwy Austin, TX 78728	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing literature
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held