CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to complete th	is form. 1 Filer ID		2 Total pages filed: 27
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRS	ST abeth	MI	OFFICE USE ONLY
	AUCIONAME	······································	CHETIV	OCT 2 5 2021
	NICKNAME LAS San	tos	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX; APT / SUIT 1106 Post	TE#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked Receipt # Amount
ADDRESS Change of Address	Houston, TX 77022			Date Processed
_				Date Imaged
5 CAMPAIGN	MS / MRS / MR FIRS	T	MI	
TREASURER NAME	MS Gab	oriella		
	NICKNAME LAST	ndiola	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX	PLEASE); APT	/ SUITE #; CITY;	STATE; ZIP CODE
(Residence or Business)	901 Eleanor			
	Houston, TX 77009			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NU (832) 272-0483	MBER EXTENSION		
8 REPORT TYPE			Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15 X 8th		Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year 09/24/2021	THROUGH	Month Day 10/23/2021	Year -
10 ELECTION	ELECTION DATE Month Day Year	Primary	ELECTION TYPE Runoff	Other
	11/02/2021	X General	Special	
11 OFFICE	OFFICE HELD (if any) Houston ISD Trustee, District 1		12 OFFICE SOUGHT (Houston ISD Trus	•
	•			
		GO TO PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 27

	Santos, Elizabeth								
13 C / OH NAME	14 Filer ID								
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expenditu These expenditures may have been made without to officeholders are required to report this information	he candidate's or officeh	older's knowledge or					
Additional Pages									
		COMMITTEE ADDRESS							
	SPECIFIC								
COMMITTEE CAMPAIGN TREASURER NAME									
	SS								
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00					
	1	AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 16,677.03					
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00					
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 25,640.39					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 6,565.75					
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 AFFADAVIT	N ROOM CHARLES TO 132 THE PARTY OF THE PARTY	I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.	Il information required to	be reported by me					
	ribed before me, by the same, 20 21, to ce	Flizabeth Sanbo	, this the 25	5 H 1 day					
Signature of office	K	Crisel N. Rodriavet Printed name of officer administering	Nofar Title of officere	Mininistering oath					

SUBTOTALS - C/OH

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

3 of 27

					30127	
18 FIL	ER NAM	1E	19 Filer ID			
Sa	intos, E	lizabeth				
		E SUBTOTALS		SUBTOTAL AMOUNT		
NA	ME OF	SCHEDULE				
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	12,151.00	
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	4,526.03	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.		SCHEDULE E: LOANS		\$		
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	25,640.39	
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.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$		
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$		
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$		
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$		



MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/10 Rpt: 4/27 FILER NAME Filer ID Santos, Elizabeth out-of-state PAC (ID#: 7 Amount of Contribution (\$) Date 5 Full name of contributor \$100.00 10/14/2021 Ann Lozano, Dolores 6 Contributor address; City; State; Zip Code Houston, TX 77061 Employer (See Instructions) Principal occupation / Job title (See Instructions) DAPR Founder Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: \$50.00 10/10/2021 Belgarde, Catherine Contributor address; City; State; Zip Code Houston, TX 77018 Principal occupation / Job title (See Instructions) Employer (See Instructions) **BHP PEtroleum** Geologist Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: \$50.00 10/12/2021 Block, Robinson Contributor address; City; State; Zip Code Houston, TX 77009 Principal occupation / Job title (See Instructions) Employer (See Instructions) Firefighter City of Houston Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$50.00 10/06/2021 Blough, Susan Contributor address; City; State; Zip Code Houston, TX 77009 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 10/22/2021 Capo, Zeph \$150.00 Contributor address; City; State; Zip Code Houston, TX 77018 Principal occupation / 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: 2/10 Rpt: 5/27 FILER NAME Filer ID Santos, Elizabeth Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 10/23/2021 \$50.00 Davila, Crystal 6 Contributor address; City; State; Zip Code Pasadena, TX 77502 Principal occupation / Job title (See Instructions) Employer (See Instructions) HISD Teacher Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 10/19/2021 \$250.00 Davila, Luz Contributor address; City; State; Zip Code Houston, TX 77023 Principal occupation / Job title (See Instructions) Employer (See Instructions) **FBISD** Educator Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 10/08/2021 Del Toro, Alma \$100.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 10/17/2021 Dentler, Kate \$25.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Staffer city of Houston Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/30/2021 \$50.00 Falcon, Roberto Contributor address; City; State; Zip Code Houston, TX 77009 Principal occupation / 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: 3/10 Rpt: 6/27 FILER NAME 3 Filer ID Santos, Elizabeth Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) \$100.00 10/10/2021 Fyda, Helena 6 Contributor address; City; State; Zip Code Houston, TX 77007 Employer (See Instructions) Principal occupation / Job title (See Instructions) Hess Corporation **HR Director** Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: \$1,000.00 10/15/2021 Garcia, Sylvia Contributor address; City; State; Zip Code Houston, TX 77249 Principal occupation / Job title (See Instructions) Employer (See Instructions) US House of Representatives Congresswoman Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$100.00 10/14/2021 Garner, Maria Contributor address; City; State; Zip Code Houston, TX 77026 Principal occupation / Job title (See Instructions) Employer (See Instructions) Educator HISD Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 10/05/2021 \$100.00 Gartner, Gary Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant **Gartner Consulting Company** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/08/2021 \$100.00 Gilliam, Lance Contributor address; City; State; Zip Code Houston, TX 77009 Principal occupation / Job title (See Instructions) Employer (See Instructions) Chief of Staff City of Houston

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/10 Rpt: 7/27 FILER NAME Filer ID Santos, Elizabeth Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 10/10/2021 Gonzalez, Maria 6 Contributor address; City; State; Zip Code Houston, TX 77055 Employer (See Instructions) Principal occupation / Job title (See Instructions) N/A Engineer Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: \$100.00 10/17/2021 Gonzalez, Maria Contributor address; City; State; Zip Code Houston, TX 77025 Principal occupation / Job title (See Instructions) Employer (See Instructions) Professor University of Houston Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 10/09/2021 Heath Espeseth, Jennifer \$100.00 Contributor address; City; State; Zip Code Houston, TX 77018 Principal occupation / Job title (See Instructions) Employer (See Instructions) **EDP Renewables** Legal Analyst Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: 10/12/2021 Hilty, Gertrude \$25.00 Contributor address; City; State; Zip Code Houston, TX 77087 Principal occupation / Job title (See Instructions) Employer (See Instructions) Houston ISD School Nurse Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/10/2021 Houston Federation of Teachers \$5,000.00 Contributor address; City; State; Zip Code Houston, TX 77023 Principal occupation / 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: 5/10 Rpt: 8/27 Filer ID FILER NAME Santos, Elizabeth 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: 10/15/2021 \$200.00 Hrabar, Stephanie 6 Contributor address; City; State; Zip Code Houston, TX 77092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 10/12/2021 \$25.00 Jeudy, Wilmer Contributor address; City; State; Zip Code Houston, TX 77008 Employer (See Instructions) Principal occupation / Job title (See Instructions) Physician Next Level Urgent Care Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 10/23/2021 \$50.00 Kerrissey, Mark Contributor address; City; State; Zip Code Houston, TX 77025 Principal occupation / Job title (See Instructions) Employer (See Instructions) Teacher HISD Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 10/13/2021 \$250.00 Khalil, Hany Contributor address; City; State; Zip Code Houston, TX 77025 Principal occupation / Job title (See Instructions) Employer (See Instructions) labor organizer Houston Federartion of Teachers Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 10/03/2021 Knudsen, Flint \$10.00 Contributor address; City; State; Zip Code Houston, TX 77071 Principal occupation / Job title (See Instructions) Employer (See Instructions) Classroom Teacher Houston Independent School District

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/10 Rpt: 9/27 3 Filer ID FILER NAME Santos, Elizabeth Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 10/23/2021 \$25.00 Knudsen, Flint 6 Contributor address; City; State; Zip Code Houston, TX 77071 Principal occupation / Job title (See Instructions) Employer (See Instructions) Classroom Teacher Houston Independent School District Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#; 09/24/2021 \$126.00 Kravetz, Ruth Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired N/A Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 09/30/2021 \$10.00 Lange, Wayne Contributor address; City; State; Zip Code Dickinson, TX 77539 Principal occupation / Job title (See Instructions) Employer (See Instructions) HFT Staff Rep **HFT** Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 10/18/2021 \$100.00 Matujec, James Contributor address; City; State; Zip Code Houston, TX 77092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/08/2021 McSherry, Noelle \$25.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) Graduate Student

SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/10 Rpt: 10/27 FILER NAME 3 Filer ID Santos, Elizabeth Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 09/24/2021 \$50.00 Morales, Claudia 6 Contributor address; City; State; Zip Code Houston, TX 77009 Principal occupation / Job title (See Instructions) Employer (See Instructions) Educator Houston Federation of Teachers Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/24/2021 \$500.00 O'Leary, Cavanaugh Contributor address; City; State; Zip Code Aspen, CO 81611 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$25.00 09/25/2021 Ortiz, Alexandra Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) Employer (See Instructions) Teacher HISD Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/24/2021 Patricia, Mary \$10.00 Contributor address; City; State; Zip Code Houston, TX 77022 Principal occupation / Job title (See Instructions) Employer (See Instructions) Insurance Agent Self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/25/2021 Pendleton, Brian \$20.00 Contributor address; City; State; Zip Code Houston, TX 77054 Principal occupation / Job title (See Instructions) Employer (See Instructions) Court Clerk Harris County

MONETARY POLITICAL CONTRIBUTIONS

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/10 Rpt: 11/27 FILER NAME 3 Filer ID Santos, Elizabeth 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 09/24/2021 \$50.00 Puente, Alicia 6 Contributor address; City; State; Zip Code Houston, TX 77018 Principal occupation / Job title (See Instructions) Employer (See Instructions) Educator HISD Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/08/2021 \$1,000.00 Quesada, Karina Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) Stay at Home Mom Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 10/18/2021 \$100.00 Rabe, Yen Contributor address; City; State; Zip Code Houston, TX 77089 Principal occupation / Job title (See Instructions) Employer (See Instructions) HISD Teacher Date Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: 10/01/2021 Renteria, Paula \$50.00 Contributor address; City; State; Zip Code Houston, TX 77009 Principal occupation / Job title (See Instructions) Employer (See Instructions) RNN/A Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/02/2021 Reyes, Cynthia \$150.00 Contributor address; City; State; Zip Code Houston, TX 77009 Principal occupation / 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: 9/10 Rpt: 12/27 Filer ID FILER NAME Santos, Elizabeth Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) \$25.00 09/24/2021 Reyna Urbina, Sandra 6 Contributor address; City; State; Zip Code Houston, TX 77009 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 10/22/2021 Riley, Traci Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) Employer (See Instructions) Manager Self-employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 10/09/2021 Rios, Eduardo \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) Banking Liftfund Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 10/05/2021 \$100.00 Rivera, Robert Contributor address; City; State; Zip Code Houston, TX 77018 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/23/2021 Rivlin, Sarah \$50.00 Contributor address; City; State; Zip Code Houston, TX 77017 Principal occupation / Job title (See Instructions) Employer (See Instructions) Teacher HISD

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 10/10 Rpt: 13/27 Filer ID FILER NAME Santos, Elizabeth 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: 09/28/2021 \$250.00 Shaw, Penny 6 Contributor address; City; State; Zip Code Houston, TX 77292 Principal occupation / Job title (See Instructions) Employer (See Instructions) State Rep State of Texas Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/26/2021 \$25.00 Smith, Jessica Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) Employer (See Instructions) Social Worker Texas Children's Hospital Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 10/19/2021 \$100.00 Waltrip, Glen Contributor address; City; State; Zip Code Houston, TX 77027 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/23/2021 Wilson, Jason \$100.00 Contributor address: City; State; Zip Code Houston, TX 77018 Principal occupation / Job title (See Instructions) Employer (See Instructions) Geologist Drive Petroleum Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 10/11/2021 Zeno, Craig \$25.00 Contributor address; City; State; Zip Code Houston, TX 77054 Principal occupation / Job title (See Instructions) Employer (See Instructions) Education HISD

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/1 Rpt: 14/27	
2 FILER NAME Santos, Eliz			3 Filer ID
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 10/23/2021	 6 Full name of contributor		8 Amount of 9 In-kind contribution contribution (\$) description \$3,007.90 I GOTV expenses Check if travel outside of Texas. Complete Schedule T.
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	
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 contribute	or's spouse (if any) (FOR JUDICIAL)
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 10/23/2021	Full name of contributor out-of-state PAC (ID#: American Federation of Techers, Texas Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$1,333.33 Cameron Mayfield Campaign Consulting
	Houston, TX 77023		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / 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 contributo	or's spouse (if any) (FOR JUDICIAL)
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 10/18/2021	Full name of contributor out-of-state PAC (ID#:		Amount of In-kind contribution contribution (\$) description \$184.80 Phonebanking Firm
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
If contributor i	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 Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 1/13 Rpt: 15/27 Santos, Elizabeth 4 Date Payee name 10/10/2021 A M Mini Mart Amount (\$) Payee address; City; State; Zip Code \$7.99 4103 N Main st Houston, TX 77009 PURPOSE 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Ice & drinks for blockwalk Office sought Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH Date Payee name 10/23/2021 A M Mini Mart Amount (\$) Payee address; City; State; Zip Code \$4.49 4103 N Main st Houston, TX 77009 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Ice for Blockwalk Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/15/2021 Aquino, Neil Amount (\$) Payee address; City; State; Zip Code \$1,200.00 5353 Memorial Dr #2064 Houston, TX 77007 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Consulting Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Consulting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C	Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Travel out of District Travel Out of District Travel Out of District Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: 2	P. FILER NAME 3 Filer ID
Sch: 2/13 Rpt: 16/27	Santos, Elizabeth
4 Date 5	Payee name
09/27/2021	Campaign Partners
6 Amount (\$) 7	' Payee address; City; State; Zip Code
\$29.00	16 Dudley St.
	Fitchburg, MA 01420
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign Website
	Campaign Website
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH	Canadate/Onicended Hame Onice sought Onice Held
Date	Payee name
10/05/2021	Campaign partners
Amount (\$)	Payee address; City; State; Zip Code
\$2.10	16 Dudley St.
	Fitchburg, MA 01420
PURPOSE (a	a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Campaign Webmail
Complete ONEV & divest	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/17/2021	Facebook
Amount (\$)	Payee address; City; State; Zip Code
\$25.00	1 Hacker Way
	Menlo Park, CA 94025
PURPOSE (a	a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Social Media Advertising
Compalate ONLY '' ''	Our Political DOWn the Library and the Community of the C
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
•	

SCHEDULE F1

Advertising Expense Event Exper Accounting/Banking Fees Consulting Expense Food/Bevers Contributions/ Donations Made By - Gift/Awards/ Candidate/Officeholder/Political Committee Legal Service

Event Expense Fees Food/Beverage Expense Gift/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)

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Gift/Awards/Memorials Legal Services The Instruction G	s Expense		xpens Wages	e /Contract Labor	Travel III District Travel Out of District OTHER (enter a category no	ot listed above)
1	Total pages Schedule F1:	2	FILER NAME	*					3 Filer ID	
	Sch: 3/13 Rpt: 17/27		Santos, Eliz	abeth						
4	Date	5	Payee name							
	10/18/2021		Facebook							
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode			
	\$25.00		1 Hacker W	ay/ay						
			Menlo Park	, CA 94025						
8	PURPOSE	(a)	Category (se	ee Categories listed at t	the top of this sch	edule)	(b)	Description		
	OF		Advertising			,			outside of Texas. Complete Sched	lule T.
	EXPENDITURE		_	•				1	, TX, officeholder living expense	
								Social Media	Advertising	
		<u>L_</u>								
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	C	Office sou	ught		Office held	
	Date	Π	Payee name							
	10/19/2021	1	Facebook							
_	Amount (\$)	┢	Payee addre	ss; City;	State:	Zip Co	ode			
	\$25.19		1 Hacker W		·	•				
	·			•						
			Menlo Park	, CA 94025				***************************************		
	PURPOSE OF	(a)	Category (Se	ee Categories listed at t	the top of this sch	edule)	(b)	Description		
	EXPENDITURE		Advertising	Expense			l	ليسبط	outside of Texas. Complete Sched	lule T.
								Social Media	, TX, officeholder living expense Advertising	
								ooda moda	, tavortioning	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	C	Office sou	ught		Office held	
⊨	Data	_								
	Date	1	Payee name							
	10/19/2021	<u> </u>	Facebook							
	Amount (\$)		Payee addres	•	State;	Zip Co	ode			
	\$25.00		1 Hacker W	ay/ay						
			Menlo Park	, CA 94025						
	PURPOSE	(a)	Category (Se	ee Categories listed at t	the top of this sch	edule)	(b)	Description	·	
	OF EXPENDITURE		Advertising					Li	outside of Texas. Complete Sched	lule T.
								II	TX, officeholder living expense	
								Social Media	Auvernsing	
	Complete ONB V !f all and	Ļ	andidet /0"	aabald		να:	<u> </u>	· · · · · · · · · · · · · · · · · · ·	000 - 1 - 11	
	Complete ONLY if direct expenditure to benefit C/OH		anuidatė/Offi	ceholder name	C	Office sou	ugnt		Office held	

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	- Gift/Award Committee Legal Serv	etage Expense ds/Memorials Expense vices truction Guide explains		xpense Vages/C	Contract Labor	Travel Out of District OTHER (enter a category not listed at	ove)
1	Total pages Schedule F1:	2 FILER NAME				3	3 Filer ID	
	Sch: 4/13 Rpt: 18/27	Santos, Elizabeth						
4	Date	5 Payee name						
	10/20/2021	Facebook						
6	Amount (\$)	7 Payee address; (City; State	; Zip Co	ode			
	\$35.00	1 Hacker Way						
	1	Menlo Park, CA 94	1025					
8	PURPOSE				(b) 1	Description		
0	OF	(a) Category (See Categorial Advertising Expense		nedule)	(v) [Description Check if travel ou	itside of Texas. Complete Schedule T.	İ
	EXPENDITURE	Advertising Expens	,e		į		TX, officeholder living expense	
	!				3	Social Media A	Advertising	
	1							
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder	r name (Office sou	ght		Office held	
	Date	Payee name						
	10/21/2021	Facebook						
	Amount (\$)	Payee address; (City; State	; Zip Co	ode		7	
	\$50.00	1 Hacker Way	2191	, —				
	•	2						
		Menlo Park, CA 94	.025					
	PURPOSE OF	(a) Category (See Categori		nedule)	(b) [Description		
	EXPENDITURE	Advertising Expens	ie .]	Ļ		itside of Texas. Complete Schedule T. FX, officeholder living expense	
					L	Social Media A		
						200101	tavertioning	
	Complete ONLY if direct	Candidate/Officeholder	r name (Office sou	ght	<u> </u>	Office held	
	expenditure to benefit C/OH				•			
	Date	Payee name						
	10/23/2021	Facebook						
	Amount (\$)	Payee address; (City; State;	; Zip Co	de			
	\$75.00	1 Hacker Way						
		Menlo Park, CA 94						
	PURPOSE OF	(a) Category (See Categori		nedule)	(b) [Description	in the part that	
	EXPENDITURE	Advertising Expens	ie		Ļ	 1	tside of Texas. Complete Schedule T. TX, officeholder living expense	
						Social Media A		
	•						www.tom.g	
	Complete ONLY if direct	Candidate/Officeholder	r name (Office sou	aht		Office held	
	expenditure to benefit C/OF			,	g			
_	- 111174444							

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		mmittee	Fees Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services	ense	Polling Exp Printing Ex	ens pens			Transportation Equipmer Travel in District Travel Out of District OTHER (enter a category	
	Credit Card Payment			The Instruction Guide	explains h	ow to cor	nple	ete this form.			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	
	Sch: 5/13 Rpt: 19/27		Santos, Eliz	abeth					1		•
4	Date	5	Payee name								•
	10/10/2021		Family Dolla	ar							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Cod	de				
	\$3.25		610b W Cav	valcade St							
			Houston, TX	< 77009							
8	PURPOSE	(2)					(h)	Description		······	
0	OF	\a,		ee Categories listed at the top	o of this sche	dule)	(D)	Description Check if travel of	outsi	de of Texas. Complete Scl	nedule T.
	EXPENDITURE		roou/bever	age Expense						officeholder living expense	
								Supplies for b	oloc	ckwalk lunch (plate	es, napkins,
								silverware)			
9	Complete ONLY if direct		Candidate/Offi	ceholder name	01	ffice souç	ght			Office held	
	expenditure to benefit C/OI	H									
	Date		Payee name								
	10/07/2021		Flores, Van	nessa							
_	Amount (\$)	_	Payee addres		State:	Zip Cod	ie.				
	\$200.00		414 Turner		Otato,	L ip 000					
	Ψ200.00		121 1411101	.							
			Houston, TX	/ 77076							
	51.55.05	_					<i></i>				
	PURPOSE OF	(a)		ee Categories listed at the top	o of this sche	dule)	(a)	Description	outci	de of Texas. Complete Scl	andula T
	EXPENDITURE		Consulting I	=xpense		1				officeholder living expense	
		Ì				1		Consulting (m			
								•		,	
	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name	Of	ffice soug	ht			Office held	
	expenditure to benefit C/OI	H				•					
	Date	Г	Payee name								
	10/10/2021		Golden Sea	food							
	Amount (\$)	├	Payee addres	·····	State:	Zip Cod	1p				
	\$38.92		2407 Airline	-	State,	Zip Cot	10				
	Ψ30.32		Z407 Amine	Di							
			Harratan T	, 7 7000							
		L	Houston, T								
	PURPOSE OF	(a)		ee Categories listed at the top	of this sche	dule)	(b)	Description			
	EXPENDITURE		Food/Bever	age Expense						de of Texas. Complete Sch officeholder living expense	
								Lunch for bloc			•
	Complete ONLY if direct		Candidate/Offic	ceholder name	Of	ffice soug	ht			Office held	
	expenditure to benefit C/O										
				PM							

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Service	Memorials Expens	se	Printing Salarie	-	e /Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed abo	ve)
1	Total pages Schedule F1:	2	FILER NAME	E						3	Filer ID	
	Sch: 6/13 Rpt: 20/27		Santos, Eliz	zabeth								
4	Date	5	Payee name	:								
	10/16/2021		Golden Sea	afood								
6	Amount (\$)	7	Payee addre	ess; Cit	ty;	State;	Zip (Code				
	\$160.26		2407 Airline	e Dr								
			Houston, T.	X 77009								
8	PURPOSE	(a)	Category (S	iee Categories	listed at the top o	f this sche	dule)	(b)	Description			
	OF EXPENDITURE		Food/Bever	rage Expe	ense				I		de of Texas. Complete Schedule T. officeholder living expense	
									Lunch for blo			
9	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Off	iceholder r	name	Of	ffice s	ought			Office held	
	Date		Payee name									
	10/20/2021		Greenshee	t media								
	Amount (\$)	<u> </u>	Payee addre	ss; Cit	y;	State;	Zip (Code				
	\$1,300.00		2601 Main	St								
			Houston, T	X 77002								
	PURPOSE	(a)	Category (S	ee Categories	listed at the top o	f this sched	dule)	(b)	Description			
	OF EXPENDITURE		Advertising	Expense					<u>l</u>		de of Texas. Complete Schedule T. officeholder living expense	
									Newspaper A		onicendider living expense	
┢	Complete ONLY if direct		Candidate/Off	iceholder r	name	Of	ffice s	ought			Office held	
	expenditure to benefit C/OI	H										
	Date		Payee name									
	10/20/2021		Greenshee	t media								
	Amount (\$)		Payee addre	ss; Cit	y;	State;	Zip (Code				
	\$1,300.00		2601 Main	St								
			Houston, T	X 77002								
	PURPOSE	(a)	Category (S	ee Categories	listed at the top o	f this sched	dule)	(b)	Description			
	OF EXPENDITURE	ŀ	Advertising	Expense							de of Texas. Complete Schedule T.	
									Newspaper A		officeholder living expense	
									· · · · · · · · · · · · · · · · · · ·			
	Complete ONLY if direct		Candidate/Offi	iceholder n	ame	Of	ffice so	 ought			Office held	
	expenditure to benefit C/O	1						_				

												:

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	ense Prir Sali	Ū	e /Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed abo	ove)
1	Total pages Schedule F1:	2 FILER NAMI	Ξ				3 Filer ID	
	Sch: 7/13 Rpt: 21/27	Santos, Eli:	zabeth					
4	Date	5 Payee name						
	10/02/2021	HEB						
6	Amount (\$)	7 Payee addre	ess; City;	State; Zi	p Code			
	\$22.06	3663 Wash	ington Ave STE 10	0				
		Houston, T	X 77007					
8	PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule	(b)	Description		
	OF EXPENDITURE	Food/Beve	rage Expense			<u></u>	outside of Texas. Complete Schedule T., TX, officeholder living expense	
						Drinks for Blo		
9	Complete ONLY if direct		iceholder name	Office	e sought		Office held	
	expenditure to benefit C/OI	-1						
	Date	Payee name	:					
	10/23/2021	Hungry Far	mers BBQ					
	Amount (\$)	Payee addre	ess; City;	State; Zi	p Code			
	\$54.08	40 E Cross	trimbers St					
		Houston, T	X 77022					
	PURPOSE OF		ee Categories listed at the to	p of this schedule	(b)	Description		
	EXPENDITURE	Food/Beve	rage Expense			<u> </u>	outside of Texas. Complete Schedule T. , TX, officeholder living expense	
						Lunch for blo		
	Complete ONLY if direct		iceholder name	Office	e sought		Office held	
	expenditure to benefit C/OI							
	Date	Payee name						
	10/23/2021	Indios Taco	House					
	Amount (\$)	Payee addre	ess; City;	State; Zi	p Code			
	\$40.19	6203 Irving	tonBlvd					
		Houston, T	X 77022					
	PURPOSE OF		ee Categories listed at the to	p of this schedule	(b)	Description		
	EXPENDITURE	Food/Beve	rage Expense				outside of Texas. Complete Schedule T., TX, officeholder living expense	
						Breakfast for		
	Complete ONLY if direct		iceholder name	Office	e sought		Office held	
	expenditure to benefit C/O	-1						
	***************************************		***************************************					

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ee L	Food/Beverage Expense Gift/Awards/Memorials E Legal Services	xpense		Expens Wages	e //Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed	i above)
				The Instruction Gui	de explains n	ow to co	ompie				
1	Total pages Schedule F1:	ı							3	Filer ID	
	Sch: 8/13 Rpt: 22/27	Sar	ntos, Eliza	abeth 							
4	Date	5 Pay	ee name								
	10/02/2021	Ind	lios Taco I	house							
6	Amount (\$)	7 Pay	ee addres:	s; City;	State;	Zip Co	ode				
	\$51.74	620	03 Irvingto	nBlvd							
		Hoi	uston, TX	77022							
_	BUDDOOF						75.				
8	PURPOSE OF	F		Categories listed at the	top of this sche	dule)	(a)	Description	nuteir	ie of Texas. Complete Schedule T.	
	EXPENDITURE	F00	od/Bevera	ige Expense				<u></u>		officeholder living expense	
								Breakfast for			
9	Complete ONLY if direct	Cand	lidate/Offic	eholder name	0:	ffice sou	ıaht			Office held	
ľ	expenditure to benefit C/OI			onorder name	J		-g				
⊨	Data										
	Date	1 1	/ee name								
	09/27/2021	ınaı	ios taco h	ouse							
	Amount (\$)		ee address	-	State;	Zip Co	ode				
	\$49.74	620	03 Irvingto	nBlvd							
		Hot	uston, TX	77022							
	PURPOSE	(a) Cate	egory (See	Categories listed at the	top of this sche	dule)	(b)	Description			
ŀ	OF			ge Expense		,			outsic	le of Texas. Complete Schedule T.	
	EXPENDITURE									officeholder living expense	
								Breakfast for	Blo	ckwalk	
	Complete ONLY if direct expenditure to benefit C/OI		didate/Office	eholder name	O	ffice sou	ıght			Office held	
	expenditure to benefit C/Or	1									
	Date	Pay	/ee name								
	10/07/2021	Kro	ger								
	Amount (\$)	Pay	/ee address	s; City;	State;	Zip Co	ode				
	\$9.73		9 W 20th 9	-	•	•					
	·										
		Hoi	uston, TX	77008							
L						_	1				
	PURPOSE OF			Categories listed at the	top of this sche	dule)	(b)	Description		le of Texas. Complete Schedule T.	
	EXPENDITURE	F00	od/Bevera	ge Expense						officeholder living expense	
								Drinks for Blo			
<u> </u>	Complete ONLY if direct	Cand	lidate/Office	eholder name	Ot	ffice sou	ıaht			Office held	
	expenditure to benefit C/OI		, =•				J				
<u> </u>	2.71.										

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

:	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Exp Legal Services The Instruction Guide	pense Printi Salar	_	se s/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not liste	ed above)
1	Total pages Schedule F1:	2 FILER NA	ME				3 Filer ID	
	Sch: 9/13 Rpt: 23/27	Santos, E						
4	Date	5 Payee nar						
	10/21/2021	Pappa Jo	ohns					
6	Amount (\$)	7 Payee add	lress; City;	State; Zip	Code			
	\$54.23	1420 W 1	.1th St					
		Houston,	TX 77008					
8	PURPOSE OF		(See Categories listed at the to	op of this schedule)	(b)	Description		
	EXPENDITURE	Food/Bev	verage Expense			Li	outside of Texas. Complete Schedule T , TX, officeholder living expense	•
						food for Phor		
9	Complete ONLY if direct	Candidate/0	Officeholder name	Office	sought		Office held	
	expenditure to benefit C/O				3 .			
	Date	Payee nar	ne					
	10/23/2021	Paypal						
	Amount (\$)	Payee add	Iress; City;	State; Zip	Code			
	\$164.38	2211 N 1	•	. ,				
		San Jose	, CA 95131					
	PURPOSE	(a) Category	(See Categories listed at the to	op of this schedule)	(b)	Description		
	OF EXPENDITURE	Fees				<u></u>	outside of Texas. Complete Schedule T	
							i, TX, officeholder living expense S Processing Fees (9/24-10)/23)
						2011a ibadiolla		0,
\vdash	Complete ONLY if direct		Officeholder name	Office	sought		Office held	
	expenditure to benefit C/O				ŭ			
	Date	Payee nar	ne					
	10/02/2021	Pho Binh						
	Amount (\$)	Payee add		State; Zip	Code	***************************************	· · · · · · · · · · · · · · · · · · ·	
	\$91.73	-	ite Oak Dr					
		Houston,	TX 77007					
	PURPOSE	(a) Category	(See Categories listed at the to	op of this schedule)	(b)	Description		
	OF EXPENDITURE		erage Expense	•			outside of Texas. Complete Schedule T	
						Check if Austin	TX, officeholder living expense	
						LUNCH IOI DIO	UNWAIK	
	Complete ONLY if direct	Candidate/	Officeholder name	Office	sought		Office held	
	expenditure to benefit C/OF		sonolado natrio	Onice	Jougni		Office field	
			· · · · · · · · · · · · · · · · · · ·					

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expen- Legal Services The Instruction Guide e	se Printin Salarie	-	e /Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed a	bove)
1	Total pages Schedule F1:	2 FILER NAM	E				3 Filer ID	
	Sch: 10/13 Rpt: 24/27	Santos, Eli	zabeth					
4	Date	5 Payee name	9					
	10/07/2021	Romero, J	esus					
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip	Code			
	\$1,200.00	23450 Sta	rgazer pt					
		Spring, TX	77373					
8	PURPOSE	(a) Category (See Categories listed at the top of	of this schedule)	(b)	Description		
	OF EXPENDITURE	Consulting	Expense			<u></u>	outside of Texas. Complete Schedule T.	
						II	, TX, officeholder living expense	
						Consulting(fi	eiu)	
_					Ц.,		0" 111	
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office s	ought		Office held	
	Date	Payee name	2					
	10/17/2021	Shipley do	nuts					
-	Amount (\$)	Payee addr	ess; City;	State; Zip	Code			
	\$27.40	3932 N Ma	•	, ,,				
	4							
		Houston T	·V 77000					
		Houston, T			T			
	PURPOSE OF		See Categories listed at the top o	of this schedule)	(b)	Description	outside of Texas. Complete Schedule T.	
	EXPENDITURE	Food/Beve	rage Expense			<u></u>	, TX, officeholder living expense	
	:	;				Breakfast for		
Complete ONLY if direct Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI				Ü			
	Date	Dougo nome						
	10/17/2021	Payee name Shipt	;					
			<u> </u>					
	Amount (\$)	Payee addre		State; Zip	Code			
	\$46.47	1827 1st A	ve NorthSuite 101					
		Birminghar	n, AL 35203					
	PURPOSE	(a) Category (See Categories listed at the top of	of this schedule)	(b)	Description		
	OF EXPENDITURE		rage Expense				outside of Texas. Complete Schedule T.	
						hermand .	, TX, officeholder living expense	
						Supplies for i	olockwalk lunch	
	Complete ONLY if direct expenditure to benefit C/OH		ficeholder name	Office s	ought		Office held	
		-						

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wanes/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 11/13 Rpt: 25/27	2 FILER NAME Santos, Elizabeth 3 Filer ID
4	Date 10/01/2021	5 Payee name Specs liquor
6	Amount (\$) \$60.77	7 Payee address; City; State; Zip Code 11130 Gulf Fwy #500
	DUDDOOF	Pasadena, TX 77034
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Drinks for Event
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	10/18/2021	Sprint 2 print
	Amount (\$) \$497.95	Payee address; City; State; Zip Code 8748 Clay Rd #300
		Houston, TX 77080
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Yard Signs
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H
*	Date 10/13/2021	Payee name Sticky LLC
	Amount (\$) \$9,295.52	Payee address; City; State; Zip Code 13617 COUNTY ROAD 109H Lady Lake, FL 32159
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign mailers
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H

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

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)

	Candidate/Officeholder/Politica Credit Card Payment	Al 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: 12/13 Rpt: 26/27	Santos, Elizabeth	
4	Date	5 Payee name	
	10/19/2021	Sticky LLC	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$9,295.52	13617 COUNTY ROAD 109H	
		Lady Lake, FL 32159	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign mailers	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit e.e.		
	Date	Payee name	
	09/28/2021	USPS	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$58.00	7511 N Shepherd Dr	
		Houston, TX 77088	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	POSTAGE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Postage for Thank You letters	
		Toolage for Maint roa tollore	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Data	T _	
	Date 10/07/2021	Payee name USPS	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$23.20	7511 N Shepherd Dr	
		Houston, TX 77088	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	POSTAGE Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Postage for Thank You letters	
	ONU V if displat		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Coi	nmittee	Gift/Awards/Memorials E Legal Services The Instruction Gu	Expense		pense ages/	e /Contract Labor	Т	ravel in District Travel Out of District OTHER (enter a cate	gory not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3 F	iler ID		
	Sch: 13/13 Rpt: 27/27		Santos, Eliz	abeth								
4	Date	5	Payee name						L			
	10/13/2021		USPS									
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de					
	\$46.40		7511 N She	-								
			Houston, T	X 77088								
8	PURPOSE	(a)		ee Categories listed at th	. tan af this ask		(b)	Description				
ľ	OF	()	POSTAGE	ee Categories listed at th	e top or this sche	edule)	(~)		outside	of Texas. Complete	Schedule T.	
	EXPENDITURE									ficeholder living exp	ense	
								Postage for T	hanl	You letters		
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder name	0	ffice souç	ght			Office held		
	Date		Payee name									
	10/10/2021		Walmart									
	Amount (\$)		Payee addre	ss; City;	State;	Zip Coo	de					
	\$45.08		1107 Shave	er St								
			Pasadena,	TX 77506								
	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description	···········			
	OF EXPENDITURE			FOR EVENTS		,		Check if travel of		of Texas. Complete		
							İ		n, TX, officeholder living expense			
								Canopy for Bl	IOCKV	vaik setup		
	Commission ONII V if alice at		>!'- !O#'									
	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Offi	ceholder name	O	ffice souç	ght			Office held		