FORM C/OH **CANDIDATE / OFFICEHOLDER** CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. CANDIDATE / MS / MRS / MR FIRST МІ OFFICE USE ONLY **OFFICEHOLDER** Bridget NAME Date Received JUL 1 0 2023 **NICKNAME** LAST SUFFIX : Wade Date Hand-delivered or Date Postmarked CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE **OFFICEHOLDER** 1614 Driscoll St. MAILING Receipt# Amount **ADDRESS** X Change of Address Houston, TX 77019 Date Processed Date Imaged MS/MRS/MR CAMPAIGN **FIRST** MI **TREASURER** NAME Melissa Mrs. Dr **NICKNAME** LAST SUFFIX Moncrief CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; ZIP CODE STATE; **TREASURER ADDRESS** 3817 Ella Lee Lane Houston, TX 77027 (Residence or Business) PHONE NUMBER CAMPAIGN AREA CODE **EXTENSION** TREASURER **PHONE** 512-825-9101 REPORT TYPE Runoff 15th day after campaign treasurer January 15 30th day before election appointment (officeholder only) 8th day before election **Exceeded** modified Final Report (Attach C/OH-FR) July 15 reporting limit PERIOD Year Day Year Month Day COVERED **THROUGH** 06/30/2023 01/01/2023 **ELECTION TYPE** 10 ELECTION **ELECTION DATE** Day Month Other Year Primary Runoff General Special 12 OFFICE SOUGHT (if known) 11 OFFICE OFFICE HELD (if any) HISD School Board Trustee District 7 Harris

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 9

13 C / OH NAME	Wade, Bridget	14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures made by political These expenditures may have been made without the candidate's or of dofficeholders are required to report this information only if they receive	ficeholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	
		COMMITTEE ADDRESS	
	SPECIFIC		
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS ES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	S, \$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,500.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$ 0.00	
	4. TOTAL POLITIC	AL EXPENDITURES	\$ 6,611.22
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE RIOD	\$ 1,924.51
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY TING PERIOD	\$ 4,000.00
17 AFFIDAVIT			
	CAMEREN DORSEY NOTARY PUBLIC STATE OF TEXAS	I swear, or affirm, under penalty of perjury, that the atrue and correct and includes all information require under Title 15, Election Code.	
A U	/ MY COMM, EXP. 07/08/26 NOTARY ID 13384985-2 Neihry Wilhehi Banh	Signature of Candidate or Office	Wall
AFFIX NO	FARY STAMP / SEAL ABO	DVE	
Sworn to and subsc of TWIY	ribed before me, by the same $\frac{20}{2}$, to calculate	aid, this the ertify which, witness my hand and seal of office.	O ^{∔h} day
(Ohwer Signature of office	DUSU er administering	Comeven Dorsey Admin Printed name of officer administering Title of officer	ASSISTEM + cer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			3 of 9
18 FILER NAME Wade, Bridg	1	19 Filer ID	
20 SCHEDULE S			SUBTOTAL AMOUNT
1. X S	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 7,500.00
2 5	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. 🔲 5	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. 🔲 🥸	SCHEDULE E: LOANS		\$
5. X S	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$ 6,611.22
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 CONTRIBUTION	ONS	\$
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$
	e de la companya de l		
1			

	MONET	ARY POLITICAL CO	ONTRIBUTIO	NS 	SCHEDU	LE A1
	The Instruc	ction Guide explains how t	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/9			
2	FILER NAME Wade, Bridge	et			3 Filer ID	
4	Date 03/16/2023	5 Full name of contributor Martin, Kimberly (Mrs.)6 Contributor address; City; Stat	out-of-state PAC (ID#: e; Zip Code)	7 Amount of Contribution (\$)	\$1,000.00
8	Principal occup Homemaker	pation / Job title (See Instructions)		9 Employer (See Instructions)	
	Date O6/12/2023 Full name of contributor out-of-state PAC (ID#:) Moss, Gary (Mr.) Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
		pation / Job title (See Instructions)		Employer (See Instructions	· · · · · · · · · · · · · · · · · · ·	
	Landscape C		Moss Landscaping			
Date Full name of contributor O3/15/2023 Smith, Thomas (Mr.) Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$5,000.00
	Principal occup Retired	pation / Job title (See Instructions)		Employer (See Instructions	;)	
Date Full name of contributor out-of-state PAC (ID#:_ 03/15/2023 Waver, James (Mr.) Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$500.00
	Principal occu Managemen	pation / Job title (See Instructions) t		Employer (See Instructions Cain Investments, Ltd.	;)	

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 9 18 FILER NAME 19 Filer ID Wade, Bridget **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE 1. \mathbf{x} SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 7,500.00 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 2. \$ 3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE E: LOANS 4. \$ 5. Х SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 6,611.22 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. 11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica	
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 1/5 Rpt: 5/9	Wade, Bridget
4	Date	5 Payee name
	04/25/2023	Beaver Media & Communications
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	5000 Longmont #12
		Houston, TX 77056
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Political Consulting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/29/2023	Nation Builder
	Amount (\$)	Payee address; City; State; Zip Code
	\$368.70	PO Box 811428
		Los Angeles, CA 90081
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Processing Fees
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experience to belief C/O	
	Date	Payee name
	01/31/2023	Prosperity Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	4295 San Felipe
L		Houston, TX 77027
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Bank Fees
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiorate to benefit C/O	

SCHEDULE F1

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

EVPENDITURE CATEGORIES FOR BOX 8(a)
Event Expense
Loan Repayment/Reimbt

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 2/5 Rpt: 6/9	Wade, Bridget
4	Date	5 Payee name
	02/28/2023	Prosperity Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
1	\$10.00	4295 San Felipe
L		Houston, TX 77027
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Bank Fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	
	Date	Payee name
	03/31/2023	Prosperity Bank
	Amount (\$)	Payee address; City; State; Zip Code
l	\$10.00	4295 San Felipe
l		
		Houston, TX 77027
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		Bank Fees
Γ	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiulture to benefit C/O	
	Date	Payee name
	06/30/2023	Prosperity Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	4295 San Felipe
L		Houston, TX 77027
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Accounting/(Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Bank Fees
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	expenditure to beliefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		nmittee	Gift/Awards/Memorials Legal Services The Instruction Gu			/ages/	/Contract Labor	Travel Out of District OTHER (enter a category not listed	above)
1	Total pages Schedule F1:	2	FILER NAME						3 Filer ID	
	Sch: 3/5 Rpt: 7/9		Wade, Brid							
4	Date	5	Payee name							
	01/09/2023		Quickbooks	;						
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de			
	\$31.98		2632 Marin	e Way						
			Mountain V	iew, CA 94043						
8	PURPOSE	(a)	Category (S	ee Categories listed at th	ne top of this sch	edule)	(b)	Description		
	OF EXPENDITURE		Accounting	/Banking				L	outside of Texas. Complete Schedule T.	
								Accounting	TX, officeholder living expense	
								7 (ccounting		
9	Complete ONLY if direct	L	Candidate/Off	ceholder name		Office sou	aht		Office held	
	expenditure to benefit C/OI									
	Date		Payee name							
	01/24/2023		Quickbooks	S						
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de			
	\$10.64		2632 Marin	e Way						
			Mountain V	iew, CA 94043						
	PURPOSE	(a)	Category (s	ee Categories listed at th	ne top of this sch	edule)	(b)	Description		
	OF EXPENDITURE		Accounting					<u></u>	outside of Texas. Complete Schedule T.	
								Accounting	TX, officeholder living expense	
								Accounting		
	Complete ONLY if direct	<u>_</u>	Candidate/Off	iceholder name	(Office sou	aht		Office held	
	expenditure to benefit C/OI						J			
	Date	Γ	Payee name							
	02/09/2023		Quickbooks							
-	Amount (\$)		Payee addre		State	; Zip Co	de			
	\$31.98		2632 Marin		Otato	, Еф 00	uo			
	**			- ··· ·						
			Mountain V	iew, CA 94043						
	PURPOSE OF	(a)		ee Categories listed at tl	ne top of this sch	iedule)	(b)	Description		
	EXPENDITURE		Accounting	/Banking				<u></u>	outside of Texas. Complete Schedule T., TX, officeholder living expense	
								Accounting	,,	
								J		
	Complete ONLY if direct		Candidate/Off	iceholder name	(Office sou	ght		Office held	
	expenditure to benefit C/OI	Н								
							•			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 4/5 Rpt: 8/9	Wade, Bridget
4	Date	5 Payee name
	03/09/2023	Quickbooks
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$31.98	2632 Marine Way
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Accounting
ĺ		Accounting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Device name
	04/10/2023	Payee name Quickbooks
┞	Amount (\$)	Payee address; City; State; Zip Code
	\$31.98	2632 Marine Way
	ψ01.30	2002 Marino Way
		Mountain View, CA 94043
L	5.155.05	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Accounting
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Oi	1
	Date	Payee name
	05/09/2023	Quickbooks
	Amount (\$)	Payee address; City; State; Zip Code
	\$31.98	2632 Marine Way
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Accounting
		, too saturing
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage 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

	Committee L	egal Services	Salaries/\	Vages/Co			rict category not listed above)
i		et				3 Filer ID	
i	Quickbooks						
\$31.98	2632 Marine	Way	State; Zip Co	ode			
ľ			o of this schedule)		Check if travel o		
NLY if direct to benefit C/OH		eholder name	Office sou	ight		Office he	ld
	Payee name Wade, Bridg	et (Mrs.)					
\$4,500.00	1614 Drisco	1	State; Zip Co	ode			
ľ				E	Check if travel of Check if Austin,	TX, officeholder living	
	Candidate/Offic	eholder name	Office sou	ight		Office he	ld
	Schedule F1: 2 Rpt: 9/9 \$31.98 GE URE VLY if direct to benefit C/OH	Schedule F1: 2 FILER NAME Rpt: 9/9	Interholder/Political Committee The Instruction Guide Schedule F1: 2 FILER NAME Wade, Bridget 5 Payee name Quickbooks 7 Payee address; City; 2632 Marine Way Mountain View, CA 94043 SE URE (a) Category (see Categories listed at the top Accounting/Banking Payee name Wade, Bridget (Mrs.) Payee address; City; 1614 Driscoll Houston, TX 77019 SE URE (a) Category (see Categories listed at the top Accounting/Banking) Candidate/Officeholder name Candidate/Officeholder Name	The Instruction Guide explains how to consider professional profession	### The Instruction Guide explains how to complete Schedule F1:	### Description Candidate/Officeholder name Candidate/Officeh	### Description Candidate/Officeholder name Candidate/Officeho

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CANDIDATE / OFFICEHOLDER FORM C/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. CANDIDATE / MS/MRS/MR FIRST MI OFFICE USE ONLY **OFFICEHOLDER** Bridget NAME Date Received JUL 1 0 2023 **NICKNAME** SUFFIX LAST Wade CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE Date Hand-delivered or Date Postmarked **OFFICEHOLDER** 1614 Driscoll St. MAILING Receipt# Amount **ADDRESS** X Change of Address Houston, TX 77019 Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST М **TREASURER** NAME Melissa Mrs. Dr NICKNAME LAST SUFFIX Moncrief CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; ZIP CODE STATE; **TREASURER ADDRESS** 3817 Ella Lee Lane Houston, TX 77027 (Residence or Business) PHONE NUMBER CAMPAIGN AREA CODE EXTENSION **TREASURER** PHONE 512-825-9101 8 REPORT TYPE 15th day after campaign treasurer January 15 30th day before election Runoff appointment (officeholder only) 8th day before election Exceeded modified Final Report (Attach C/OH-FR) July 15 reporting limit.... PERIOD Year Day Year Month COVERED **THROUGH** 01/01/2023 06/30/2023 part of the fact of the experience of the experi **ELECTION TYPE** 10 ELECTION **ELECTION DATE** Month Runoff Day Year Primary Other General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) HISD School Board Trustee District 7 Harris

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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 1/5 Rpt: 5/9	Wade, Bridget
Date	5 Payee name
04/25/2023	Beaver Media & Communications
3 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 5000 Longmont #12 Houston, TX 77056
3 Purpose Of Expenditure	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political Consulting
O Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/29/2023	Nation Builder
Amount (\$) \$368.70	Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Processing Fees
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/31/2023	Prosperity Bank
Amount (\$) \$10.00	Payee address; City; State; Zip Code 4295 San Felipe
	Houston, TX 77027
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Poiling Expense Printing Expense

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

	Candidate/Officeholder/Political Credit Card Payment	Committee	Legal Services The Instruction Guide	Salaries/\	Nages/	Contract Labor	OTHER (enter a category not listed	above)
1	Total pages Schedule F1:	2 FILER NAM	E	· · · · · · · · · · · · · · · · · · ·		[:	Filer ID	
	Sch: 3/5 Rpt: 7/9	Wade, Brid						
4	Date	5 Payee name	?					
	01/09/2023	Quickbook	S					
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode			
	\$31.98	2632 Marir	ne Way					
			/iew, CA 94043		Ţ		***************************************	
8	PURPOSE OF		See Categories listed at the to	op of this schedule)	(b)	Description		
	EXPENDITURE	Accounting	g/Banking			<u> </u>	utside of Texas. Complete Schedule T. TX, officeholder living expense	
						Accounting	TA, officerolder living expense	
						Accounting		
9	Complete ONLY if direct	Candidata/Of	ficeholder name	Office so	labt.	· · · · · · · · · · · · · · · · · · ·	Office held	
9	expenditure to benefit C/OI		ilcentilder name	Office soi	ugnı		Onice neig	
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	Date	Payee name						
	01/24/2023	Quickbook	S					
	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode			
	\$10.64	2632 Mariı	ne Way					
		Mountain \	/iew, CA 94043		-			
	PURPOSE OF		See Categories listed at the t	op of this schedule)	(b)	Description		
	EXPENDITURE	Accounting	g/Banking			<u></u>	utside of Texas. Complete Schedule T.	
	:					Accounting	TX, officeholder living expense	
						Accounting		
	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	Laht.		Office held	
	expenditure to benefit C/O		ncendider name	Office sur	ugni		Office field	
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	Date	Payee nam		•				
	02/09/2023	Quickbook	S	***************************************		***************************************		
	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode			
	\$31.98	2632 Mari	ne Way					
		Mountain '	View, CA 94043					
Г	PURPOSE	(a) Category	See Categories listed at the t	op of this schedule)	(b)	Description		
	OF EXPENDITURE	Accounting				Check if travel o	utside of Texas. Complete Schedule T.	
	EXPENDITORE					<u> </u>	TX, officeholder living expense	
						Accounting		
L					1			
l	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office so	ught		Office held	
	evheuritate to nettetit C/OI							
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/wards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

	Credit Card Payment		The instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1: Sch: 5/5 Rpt: 9/9		FILER NAME Wade, Bridget		3 Filer ID
4	Date 06/09/2023		Payee name Quickbooks		
6	Amount (\$) \$31.98		Payee address; City; State; Zip Co 2632 Marine Way Mountain View, CA 94043	ode	
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Accounting/Banking	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Accounting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Office sou	ıght	Office held
	Date 06/02/2023		Payee name Wade, Bridget (Mrs.)		
	Amount (\$) \$4,500.00		Payee address; City; State; Zip Co 1614 Driscoll Houston, TX 77019	ode	
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Partial Loan Repayment
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Office sou	ught	Office held

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			• •	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2								
	Sch: 1/5 Rpt: 5/9		Wade, Bridget							
4	Date	5	Payee name							
	04/25/2023		Beaver Media & Communications							
6	Amount (\$)	7								
	\$1,500.00		5000 Longmont #12 Houston, TX 77056							
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b) Description	nutei	da of Toyor, Complete Schedule T			
	EXPENDITURE		Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political Consulting							
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ght		Office held			
Г	Date		Payee name							
	06/29/2023		Nation Builder							
	Amount (\$)	Payee address; City; State; Zip Code								
	\$368.70									
			Los Angeles, CA 90081							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this s Fees	chedule)		, TX	ide of Texas. Complete Schedule T. , officeholder living expense S			
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ıght		Office held			
Γ	Date	Γ	Payee name							
01/31/2023			Prosperity Bank							
	Amount (\$) Payee address; City; State; Zip Code \$10.00 4295 San Felipe									
		Houston, TX 77027								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this s Accounting/Banking	chedule)	, <u>, , , , , , , , , , , , , , , , , , </u>		ide of Texas. Complete Schedule T. , officeholder living expense			
-	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ıght		Office held			
	rms provided by Texas F	·+b:	cs Commission www.ethics	e state by :			Version V3.5.1 a18ea2ca			

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/Manss/Contract Labor

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

	Candidate/Officeholder/Politica Credit Card Payment	d Committee	Legal Services The Instruction Gu	Salaries/ ide explains how to co		Contract Labor ete this form.	OTHER (enter a category not listed abo	ove)
1	Total pages Schedule F1: Sch: 3/5 Rpt: 7/9	2 FILER N Wade,				3	Filer ID	
	Date 01/09/2023	5 Payee n Quickb	ooks					
6	Amount (\$) \$31.98		ddress; City; arine Way ain View, CA 94043	State; Zip C	ode			
8	PURPOSE OF EXPENDITURE		y (See Categories listed at th hting/Banking	e top of this schedule)	(b)		de of Texas. Complete Schedule T. officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		e/Officeholder name	Office so	ught		Office held	
	Date 01/24/2023	Payee n Quickb						
	Amount (\$) \$10.64		ddress; City; Iarine Way ain View, CA 94043	State; Zip C	ode		·	
	PURPOSE OF EXPENDITURE		Y (See Categories listed at th ting/Banking	e top of this schedule)	(b)		de of Texas. Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		e/Officeholder name	Office so	ught		Office held	
	Date 02/09/2023	Payee n Quickb		·				
	Amount (\$) \$31.98		ddress; City; Iarine Way uin View, CA 94043	State; Zip C	ode			
	PURPOSE OF EXPENDITURE	(a) Categor	y (See Categories listed at th	e top of this schedule)	(b)	L	de of Texas, Complete Schedule T, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		e/Officeholder name	Office so	ught		Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment			Git/Awards/Memorials Ex Legal Services		inting Expe daries/Wag	nse es/Contract L	abor	OTHER (enter a category	not listed above)	
_				The Instruction Guid	le explains hov	v to comp	lete this fo	rm.			
1.	Total pages Schedule F1:	2	FILER NAME					3	Filer ID		
	Sch: 5/5 Rpt: 9/9		Wade, Bridg	jet							
4	Date	5	Payee name								
	06/09/2023		Quickbooks								
6	Amount (\$)	7	Payee addres	ss; City;	State; Z	ip Code	· · · · · · · · · · · · · · · · · · ·				
	\$31.98		2632 Marine	e Way							
			Mountain Vi	ew, CA 94043							
8	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this schedul	e) (i) Descrip	tion			
	OF EXPENDITURE		Accounting/				Check	k if travel outsi	de of Texas. Complete Scl		
	LAPLADITORL						lineary)		officeholder living expens	e ′	
							Accour	nting			
		L	2 11 1000	F . F E	0.00						
9	Complete ONLY if direct expenditure to benefit C/O		Jandidate/Offi	ceholder name	Offic	ce sough	t		Office held		
_		-									
	Date		Payee name								
	06/02/2023		Wade, Brido		-						
	Amount (\$)		Payee addres	-	State; Z	ip Code	;				
	\$4,500.00		1614 Drisco	oli							
			Houston, T	< 77019							
	PURPOSE	(a)		ee Categories listed at the		ie) (i) Descrip				
OF EXPENDITURE			Loan Repayment/Reimbursement				Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
								Loan Rep		ч	
	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name	Offic	ce sough	nt		Office held		
	expenditure to benefit C/O					J					
 											

FORM C/OH CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. FIRST CANDIDATE / MS/MRS/MR MI OFFICE USE ONLY **OFFICEHOLDER Bridget** NAME Date Received **NICKNAME SUFFIX** LAST Wade Date Hand-delivered or Date Postmarked CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; ZIP CODE OFFICEHOLDER 1614 Driscoll St. MAILING Amount Receipt # **ADDRESS** X Change of Address Houston, TX 77019 Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST М **TREASURER** NAME Mrs. Melissa Dr **NICKNAME** LAST **SUFFIX** Moncrief STREET ADDRESS (NO PO BOX PLEASE); CAMPAIGN APT / SUITE #; CITY; STATE: ZIP CODE **TREASURER ADDRESS** 3817 Ella Lee Lane Houston, TX 77027 (Residence or Business) PHONE NUMBER **CAMPAIGN** AREA CODE **EXTENSION TREASURER** PHONE 512-825-9101 REPORT **TYPE** 30th day before election Runoff 15th day after campaign treasurer January 15 appointment (officeholder only) Exceeded modified Final Report (Attach C/OH-FR) July 15 8th day before election reporting limit er en en dezen er kartina en en ken Day Year PERIOD Month Day Year Month COVERED **THROUGH** 06/30/2023 01/01/2023 . The second The second s 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other Special General 12 OFFICE SOUGHT (if known) 11 OFFICE OFFICE HELD (if any) HISD School Board Trustee District 7 Harris **GO TO PAGE 2**

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 9 **18 FILER NAME** 19 Filer ID Wade, Bridget 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 7,500,00 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS 3, \$ SCHEDULE E: LOANS \$ X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 6,611.22 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. SCHEDULE I; NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12, TO FILER