CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

Т	he C/OH Instruction	Guide explains how to o	complete this form.	1. Filer ID (Ethics Commissi 82-0933721	ion Filers)	2. Total pages	filed:
-		MS/MRS/MR	FIRST	02 0733721	MI	OFFICE L	ISE ONLY
	CANDIDATE/ OFFICEHOLDER	Ms.	Sue			Date Received	•
3	NAME:	NICKNAME	LAST		SUFFIX		•
١.	(VAIVIC.)		Deigaard				
-						1	
			*			JAN 1	7 2023
4	CANDIDATE/	ADDRESS /PO BOX: A	PT/SUITE# CITY	STATE:	ZIP CODE		
	OFFICEHOLDER MAILING ADDRESS	3502 Elmridge Street	Houston	TX	77025	Date Hand-delivered	or Date Postmarked
	Change of Address					•	
_	CANDIDATE	AREA CODE PHO	VIE VII IMDED.	EVTENICION			
5	CANDIDATE/ OFFICEHOLDER		NE NUMBER	EXTENSION	1	Receipt#	Amount \$
	PHONE	(713) 666-70	040	,			
6	CAMPAIGN	MS/MRS/MR	FIRST	. 4	MI		
	TREASURER	Ms.	Jenny	e e e e e e e e e e e e e e e e e e e		Date Processed	
	NAME	NICKNAME	LAST		SUFFIX		
			Beech			Date Imaged	
7	CAMPAIGN	STREET ADDRESS (NO PO BO	X PLEASE): APT/SUITE	# CITY	STATE:	ZIP CODE	·
'	TREASURER	1930 Addison		Houston	TX	77030	
	ADDRESS						
Ŀ	(Residence or Business)	ABEA CODE	IONE NUMBER	EVERNOION			
8	CAMPAIGN TREASURER		HONE NUMBER	EXTENSION	V		
	PHONE	(713) 447-8	484	*.			
9	REPORT TYPE	✓ January 15	30th day before election				er campaign tresurer
-		July 15	8th day before election		eeded Modified orting limit		t (officeholder only) (Attach- COH-FR)
10	PERIOD	Month Day Ye	ear		Month	Day Yea	`
L	COVERED	07/01/2022		ROUGH		12/31/2022	
11	ELECTION	ELECTION DATE Month Day	Year ELECTION		Runoff 🗍 (Other	
		12/11/2021	Gener	-	special		
12	OFFICE	OFFICE HELD (if any)	HISD District V Truste	13	OFFICE SOUGH	IT (if known)	
_	NOTICE EDGM	TURO DOVID FOR MOTIOS OF DO			AL EXPENDITIONS A	AADE DV DOUTION OO	WHITTERS TO
14	NOTICE FROM POLITICAL	THIS BOX IS FOR NOTICE OF PO SUPPORT THE CANDIDATE / OF	FICEHOLDER. THESE EXPEND	ITURES MAY HAVE I	BEEN MADE WITHOU	IT THE CANDIDATE'S OF	ROFFICEHOLDER'S
	COMMITTEE(S)	KNOWLEDGE OR CONSENT. CA OF SUCH EXPENDITURES.	NDIDATES AND OFFICEHOLDE	RS ARE REQUIRED	TO REPORT THIS IN	FORMATION ONLY IF TE	MEY RECEIVE NOTICE
ŀ	additional pages	COMMITTEE TYPE	COMMITTEE NAME				
	Ladditional pages	GENERAL SPECIFIC	COMMITTEE ADDRESS				
			COMMITTEE ADDITEOS				
1:			COMMITTEE CAMPAIGN	TREASURER NAM			
,							
			COMMITTEE CAMPAIGN	TREASURER ADD	RESS		
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			CO TO DA	CE 2			
			GO TO PA	GE Z			
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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH

CAMPAIGN	-INANCE REPORT	COVER SHEET PG 2
15 C/OH NAME	Ms. Sue Deigaard	16 Filer ID (Ethics Commission Filers) 82-0933721
17 CONTRIBUTION TOTALS	1 TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES OR GUARANTEES OF LOANS OR CONTRIBUTIONS MADE ELECTRONICAL	s, LOANS, LY) \$0.00
	2 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$0.00
EXPENDITURE TOTALS	3 TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$0.00
	4 TOTAL POLITICAL EXPENDITURES	\$1,777,72
CONTRIBUTION BALANCE	5 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$7,804.66
OUTSTANDING LOAN TOTALS	6 TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$0.00
VE NY C	TATE OF TEXAS OMM. EXP. 12/10/25 ARY ID 1091839.7	Capdidate or Officeholder
(1) Affidavit NOTARY STAMP / SEA		
Sworn to and subscribed	before me, by the said Suc Deisca rd 3 to certify which, witness my hand and seal of office.	this the
Vero hice Signature of officer admir	Mahasa Ucronica Mahasa istering oath Printed name of officer administering oath	Title of officer administering oath
(2) Unsworn Declaration	OR , and my date of birt	
My name is My address is	, and my date of birt	
iviy addiess is	(street) ' (city)	(state) (zip code) (country)
Executed in	County, State of on the	day of 20 (month) (year)
	Signature o	f Candidate/Officeholder (Declarant)

SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

19. F	ILER NAME Ms. Sue Deigaard	20. FILER ID (Ethic 82-0933721	s Commission Filers)
	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTALS AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$0.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	S ·	0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$0.00
4.	SCHEDULE E: LOANS		\$0.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$1,777.72
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL OF	CONTRIBUTIONS	\$0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	entropy (a) and the second of the second	\$0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	NDS:	\$0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	1	\$0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL		\$0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUT TO FILER	IONS RETURNED	\$0.00

	EXPENDITURE CATEGORIES	FOR B	OX 8(a)	!	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Office Overhead/Rental Polling Expense Printing Expense Offit/Awards/Memorials Expense Salaries/Wages/Contral Legal Services		Transı Exper Travel Travel	ation/Fundraising Expense portation Equipment & Related ise I In District I Out of District (enter a category not listed abov	ve)
Credit Card Payment	The Instruction Guide explains how to co	mplete		Center a category not noted above	VC)
Total pages Schedule F1:	FILER NAME Ms. Sue Deigaard	3		Ethics Commission Filers)	
4 Date 07/13/2022	5 Payee name NGP VAN, Inc			:	
6 Amount \$159.90	7 Payee address; City; PO Box 392264 Pittsburgh, PA 15251-9264	Sta	ate:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense		escription pliance		
9 Complete ONLY if direct expenditure to benefit C/OH	Check if travel outside of Texas, complete Schedule T Candidate/Officeholder name	Office s		in, TX, officeholder living expense Office held	
4 Date 08/08/2022	5 Payee name NGP VAN, Inc	,			
6 Amount \$159.90	7 Payee address; City; PO Box 392264 Pittsburgh, PA 15251-9264	Sta	ate:	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	Com	escription pliance	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office s	<u> </u>	Office held	
4 Date 09/06/2022	5 Payee name NGP VAN, Inc				
6 Amount \$159.90	7 Payee address; City; PO Box 392264 Pittsburgh, PA 15251-9264	St	ate:	Zip Code	
PURPOSE OF	(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	1 ' '	escription pliance		
9 Complete ONLY if direct	Check if travel outside of Texas, complete Schedule T	Office s	J	tin, TX, officeholder living expense	•
expenditure to benefit C/OH	Candidate/Officeholder name	Onice s		Office held	
	ATTACH ADDITIONAL COPIES OF THIS SCH	IEDULI	E AS NEE	DED	

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Fees Polling Expense Transportar Expense Printing Expense Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Legal Services Travel Out				
	2. FILER NAME			s Commission Filers)	
1. Total pages benedule 11.	Ms. Sue Deigaard	ľ	82-093372	· · · · · · · · · · · · · · · · · · ·	
4 Date	5 Payee name				
08/05/2022	Google Inc.				
6 Amount	7 Payee address; City;	S	tate:	Zip Code	
\$54.84	1 1 ayou address,	i		_, -,	
	1600 Amphitheatre Pkwy Mountain View, CA 94043-	1351			
8	(a) Catagoni	165 D	escription		
PURPOSE	(a) Category (See categories listed at the top of this schedule):	1111111	gle Compute Cloud	(website)	
OF	Office Overhead/Rental Expense	1 000		(11000110)	
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	΄ Γ	Check if Austin, TX,	officeholder living expense	
9 Complete ONLY if direct	Candidate/Officeholder name	Office	sought	Office held	
expenditure to benefit C/OH					
4 Date	5 Payee name			,	
09/06/2022	Google Inc.				
6 Amount	7 Payee address; City;	S	tate:	Zip Code	
\$44.77	, ayou dadisas,				
	1600 Amphitheatre Pkwy Mountain View, CA 94043-	-1351			
8	(a) Category (See categories listed at the top of this schedule)	(b) D	Description		
PURPOSE	Office Overhead/Rental Expense	1 ' '	ngle G-Suite		
OF EXPENDITURE	Office Overnead Remai Expense				
EXPENDITORE	Check if travel outside of Texas, complete Schedule T		Check if Austin, TX	officeholder living expense	
9 Complete ONLY if direct	Candidate/Officeholder name	Office	sought	Office held	
expenditure to benefit C/OH	•	*			
4 Date	5 Payee name				
09/06/2022	Google Inc.				
6 Amount	7 Payee address; City;	S	State:	Zip Code	
\$55.00				·	
	1600 Amphitheatre Pkwy Mountain View, CA 94043-1351				
8	(a) Category (See categories listed at the top of this schedule)	(b) [Description		
PURPOSE	Office Overhead/Rental Expense		Google Compute Cloud (website)		
OF EXPENDITURE	Office Overfication Expense				
EXPLINITION	Check if travel outside of Texas, complete Schedule T		Check if Austin, TX	, officeholder living expense	
9 Complete ONLY if direct	Candidate/Officeholder name	Office	sought	Office held	
expenditure to benefit C/OH		•			
	ATTACH ADDITIONAL COPIES OF THIS SCH	IEDUL	E AS NEEDEI		
	•				

	EXPENDITURE CATEGORIES	FORE	BOX 8(a)		
Candidate/Officeholder/Political Committee	Event Expense Office Overhead/Renta Fees Polling Expense Food/Beverage Expense Printing Expense Gift/Awards/Memorials Expense Legal Services		Transp Expen Travel Travel	ation/Fundraising Expense portation Equipment & Related se In District Out of District (enter a category not listed abo	ve)
Credit Card Payment	The Instruction Guide explains how to co	omplete	this form.		
Total pages Schedule F1:	FILER NAME Ms. Sue Deigaard		3. Filer ID (1 82-09	Ethics Commission Filers) 33721	
4 Date 10/05/2022	5 Payee name Google Inc.				
6 Amount \$44.77	7 Payee address; City; 1600 Amphitheatre Pkwy Mountain View, CA 94043		tate:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense		Description ogle G-Suite		
	Check if travel outside of Texas, complete Schedule T			n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought	Office held	
4 Date 10/05/2022	5 Payee name Google Inc.		·:		
6 Amount \$53.55	7 Payee address; City; 1600 Amphitheatre Pkwy Mountain View, CA 94043		tate:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	, 1, ,	Description ogle Compute C	Cloud (website)	:
,	Check if travel outside of Texas, complete Schedule T		Check if Austi	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought	Office held	
4 Date	5 Payee name				1
11/07/2022	Google Inc.				<u> </u>
6 Amount \$44.77	7 Payee address; City; 1600 Amphitheatre Pkwy Mountain View, CA 94043		State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense		Description ogle G-Suite		
LA LINDII OIL	Check if travel outside of Texas, complete Schedule T	, [Check if Aust	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS SCH	HEDÚL	E AS NEE	DED	

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense						
1. Total pages Schedule F1:	2. FILER NAME	3. Fi	ler ID (Ethics Commission Filers)			
	Ms. Sue Deigaard		82-0933721			
4 Date	5 Payee name					
11/07/2022	Google Inc.					
6 Amount \$54.84	7 Payee address; City;	State:	Zip Code			
934.04	1600 Amphitheatre Pkwy Mountain View, CA 94043-1	1351				
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Descr Google Co	iption ompute Cloud (website)			
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Chec	ck if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	ht Office held			
4 Date 12/05/2022	5 Payee name Google Inc.	· · · · · · · · · · · · · · · · · · ·				
6 Amount \$44.77	7 Payee address; City; 1600 Amphitheatre Pkwy Mountain View, CA 94043-	State: 1351	Zip Code			
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Descr Google G	·			
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Che	ck if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	ht Office held			
4 Date 12/05/2022	5 Payee name Google Inc.					
6 Amount \$53.44	7 Payee address; City; 1600 Amphitheatre Pkwy Mountain View, CA 94043-	State: 1351	Zip Code			
8 PURPOSE OF	(a) Category. (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Google Compute Cloud (website)				
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Che	ck if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	<u> </u>	Office soug	ht Office held			
	ATTACH ADDITIONAL COPIES OF THIS SCHI	EDULE A	S NEEDED			