

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 10	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Bridget	MI	
	NICKNAME	LAST Wade	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address Houston, TX 77098			OFFICE USE ONLY Date Received <b>JAN 19 2022</b>	
			ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 3262 Westheimer Rd. #881	
			Date Hand-delivered or Date Postmarked	Receipt #      Amount
			Date Processed	Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	
	NICKNAME	LAST	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month    Day    Year 12/02/2021	THROUGH	Month    Day    Year 12/31/2021	
10 ELECTION	ELECTION DATE Month    Day    Year 12/11/2021	ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) HISD School Board Trustee Place Houston District 7		

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**  
2 of 10

<b>13 C/OH NAME</b> Wade, Bridget		<b>14 Filer ID</b>
<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b> <input checked="" type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	<b>COMMITTEE TYPE</b> <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b> Texas Latino Conservatives PAC
		<b>COMMITTEE ADDRESS</b> PO Box 130853 Houston, TX 77219
		<b>COMMITTEE CAMPAIGN TREASURER NAME</b> Longoria, Hector
		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b> PO Box 130853 Houston, TX 77219
<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,192.52
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 10,818.03
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,130.94
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 7,000.00

**17 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



**SECUSHA MONIQUE LUCKY  
NOTARY PUBLIC  
STATE OF TEXAS  
MY COMM. EXP. 08/23/23  
NOTARY ID 13214141-2**

*Bridget Wade*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bridget Wade, this the 19<sup>th</sup> day of January, 2022, to certify which, witness my hand and seal of office.

*Secusha Monique Lucky*      Secusha Monique Lucky      Notary  
Signature of officer administering      Printed name of officer administering      Title of officer administering oath

**CANDIDATE / OFFICEHOLDER REPORT  
SUPPORT & TOTALS**

**FORM C/OH  
ADDENDUM**

Page 3 of 10

C / OH NAME	Wade, Bridget	Filer ID
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17 NOTICE FROM POLITICAL COMMITTEE(S)	.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures ..	
	COMMITTEE TYPE	COMMITTEE NAME
	<input checked="" type="checkbox"/> GENERAL	FFOT PAC
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		PO Box 341027  Austin, TX 78746
		COMMITTEE CAMPAIGN TREASURER NAME Hobbs, Cabell
	COMMITTEE CAMPAIGN TREASURER ADDRESS PO Box 341027  Austin, TX 78746	

**SUBTOTALS - C/OH**

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

4 of 10

<b>18 FILER NAME</b> Wade, Bridget		<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,600.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 592.52
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 10,800.76
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 17.27
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/2 Rpt: 5/10
<b>2</b> FILER NAME Wade, Bridget		<b>3</b> Filer ID
<b>4</b> Date 12/03/2021	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 4605 POP, Ltd.  <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77027	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, Lester (Mr.)  Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions)
Date 12/03/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aubrey, Amy (Mrs.)  Contributor address; City; State; Zip Code  Houston, TX 77056	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)
Date 12/06/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clements, Glenn (Mr.)  Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalton, Wendy (Mrs.)  Contributor address; City; State; Zip Code  Houston, TX 77024	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/2 Rpt: 6/10
<b>2</b> FILER NAME Wade, Bridget		<b>3</b> Filer ID
<b>4</b> Date 12/12/2021	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deneburg, Sandi (Mrs.)	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77027		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
<b>Date</b> 12/08/2021	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hack, Lance (Mr.)	<b>Amount of Contribution (\$)</b> \$100.00
<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77019		
<b>Principal occupation / Job title (See Instructions)</b> CPA		<b>Employer (See Instructions)</b> Self
<b>Date</b> 12/13/2021	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelps, Joanne (Ms.)	<b>Amount of Contribution (\$)</b> \$100.00
<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77027		
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 12/13/2021	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom Ramsey Campaign	<b>Amount of Contribution (\$)</b> \$2,500.00
<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77234		
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/06/2021	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkins, Bert (Mr.)	<b>Amount of Contribution (\$)</b> \$100.00
<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77009		
<b>Principal occupation / Job title (See Instructions)</b> Architect		<b>Employer (See Instructions)</b> LA Architects

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 7/10	
2 FILER NAME Wade, Bridget		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/05/2021	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rally to GOTV 7 Contributor address; City; State; Zip Code 4130 Turnberry Circle Houston, TX 77025	8 Amount of contribution (\$) \$592.52	9 In-kind contribution description Food and Beverage for Event  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/2 Rpt: 8/10	<b>2</b> FILER NAME Wade, Bridget	<b>3</b> Filer ID
<b>4</b> Date 12/07/2021	<b>5</b> Payee name Aubrey R. Taylor Communications	
<b>6</b> Amount (\$) \$1,500.00	<b>7</b> Payee address; City; State; Zip Code 957 Nasa Parkway #251  Houston, TX 77058	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Paper Ad
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/30/2021	Payee name Graves, John (Mr.)	
Amount (\$) \$499.19	Payee address; City; State; Zip Code 5459 Imogene St.  Houston, TX 77096	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2021	Payee name Mammoth Marketing	
Amount (\$) \$8,738.92	Payee address; City; State; Zip Code 4500 Bissonnet Street #370  Bellaire, TX 77401	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mail Outs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/2 Rpt: 9/10	<b>2</b> FILER NAME Wade, Bridget	<b>3</b> Filer ID
<b>4</b> Date 12/31/2021	<b>5</b> Payee name Nation Builder	
<b>6</b> Amount (\$) \$26.00	<b>7</b> Payee address; City; State; Zip Code PO Box 811428  Los Angeles, CA 90081	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 12/31/2021	Payee name Prosperity Bank	
Amount (\$) \$10.00	Payee address; City; State; Zip Code 4295 San Felipe  Houston, TX 77027	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 12/09/2021	Payee name Quickbooks	
Amount (\$) \$26.65	Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/1 Rpt: 10/10	<b>2</b> FILER NAME Wade, Bridget	<b>3</b> Filer ID
<b>4</b> Date 12/31/2021	<b>5</b> Payee name Wade, Bridget (Mrs.)	
<b>6</b> Amount (\$) \$17.27  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 3262 Westheimer Rd. #881  Houston, TX 77098	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  UPS Box
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held