

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TX**

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: 25	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Elizabeth	MI	OFFICE USE ONLY Date Received CSO REC'D JAN 15 '25 PM4:08
	NICKNAME	LAST Beck	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	Date Hand-delivered or Date Postmarked
	[REDACTED]			Receipt #
				Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <i>Eva</i>	MI	
	NICKNAME	LAST <i>Bonilla</i>	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>362 Foch A. FW TX 76107</i>			
7 CAMPAIGN TREASURER PHONE	AREA CODE <i>817</i>	PHONE NUMBER <i>300</i>	EXTENSION <i>1256</i>	
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	Month Day Year
				THROUGH
10 ELECTION	ELECTION DATE Month Day Year <i>05/05/2025</i>		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) Fort Worth City Council District 9		12 OFFICE SOUGHT (if known) Fort Worth City Council District 9	

GO TO PAGE 2

SUBTOTALS - C/OH

18 FILER NAME Beck, Elizabeth		19 Filer ID
20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,913.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 6,964.90
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 250.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/11 Rpt: 5/25
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angle, John	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 2420 South Adams Street Fort Worth, TX 76110		
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) AMM Political
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belhumeur, Marc	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 413 Scrub Oak Ct Fort Worth, TX 76108		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigvand, Zagros	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code PO BOX #224767 Dallas, TX 75222		
Principal occupation / Job title (See Instructions) Self-employed		Employer (See Instructions) Zagros Bigvand
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigvand, Zagros	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code P.O. Box 224767 Dallas, TX 75222		
Principal occupation / Job title (See Instructions) Real estate development		Employer (See Instructions) Self emlhed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, William	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3429 Medina Ave Fort Worth, TX 76133		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/11 Rpt: 7/25
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Logan	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 1000 San Marcos St Apt 366 Austin, TX 78702		
8 Principal occupation / Job title (See Instructions) Legislative Director		9 Employer (See Instructions) Texas House of Representatives
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Logan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 1000 San Marcos St Apt 366 Austin, TX 78702		
Principal occupation / Job title (See Instructions) Legislative Director		Employer (See Instructions) Texas House of Representatives
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Logan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 1000 San Marcos St Apt 366 Austin, TX 78702		
Principal occupation / Job title (See Instructions) Legislative Director		Employer (See Instructions) Texas House of Representatives
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Logan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 1000 San Marcos St Apt 366 Austin, TX 78702		
Principal occupation / Job title (See Instructions) Legislative Director		Employer (See Instructions) Texas House of Representatives
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Logan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 1000 San Marcos St Apt 366 Austin, TX 78702		
Principal occupation / Job title (See Instructions) Legislative Director		Employer (See Instructions) Texas House of Representatives

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/11 Rpt: 9/25
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justin, Perry	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 1720 Alston Ave Fort Worth, TX 76110		
8 Principal occupation / Job title (See Instructions) Welder		9 Employer (See Instructions) Southwestern Equipment Co.
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justin, Perry	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1720 Alston Ave Fort Worth, TX 76110		
Principal occupation / Job title (See Instructions) Welder		Employer (See Instructions) Southwestern Equipment Co.
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justin, Perry	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1720 Alston Ave Fort Worth, TX 76110		
Principal occupation / Job title (See Instructions) Welder		Employer (See Instructions) Southwestern Equipment Co.
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krampitz, Tom	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 807 N Oak Cliff Blvd Dallas, TX 75208		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krampitz, Tom	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 807 N Oak Cliff Blvd Dallas, TX 75208		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/11 Rpt: 11/25
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Jesse	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code P. O. Box 14083 Haltom City, TX 76117		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Triple S Mfg
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, William	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 6251 Stevenson Oaks Dr Apt 2117 Fort Worth, TX 76123-2775		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jack	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 3832 Cresthill Rd. Benbrook, TX 76116		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, William	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code 448 W 19th St #295 Houston, TX 77008		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stinson, Henry	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 9040 Blue Ridge Trl Fort Worth, TX 76118		
Principal occupation / Job title (See Instructions) database developer		Employer (See Instructions) Artech Information Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/11 Rpt: 13/25
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilcox, Susan	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 2600 West 7th st. #2650 Fort Worth, TX 76107		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilcox, Susan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2600 West 7th st. #2650 Fort Worth, TX 76107		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Greg	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 6387 Camp Bowie Blvd 290 Fort Worth, TX 76116		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Ridglea Legacy
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodcook, Craig	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 3320 Camp Bowie Blvd. #1208 Fort Worth, TX 76107		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ben E. Keith Company
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Gail	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 4300 Ledgeview Rd Fort Worth, TX 76109		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/10 Rpt: 15/25		2 FILER NAME Beck, Elizabeth		3 Filer ID	
4 Date 08/01/2024		5 Payee name ActBlue			
6 Amount (\$) \$16.13		7 Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/01/2024		Payee name ActBlue			
Amount (\$) \$25.10		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/01/2024		Payee name ActBlue			
Amount (\$) \$23.13		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee	
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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/10 Rpt: 17/25	2 FILER NAME Beck, Elizabeth	3 Filer ID
4 Date 12/02/2024	5 Payee name Bank of America	
6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code PO Box 15284 Wilmington, DE 19850	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/01/2024	Payee name Bank of America	
Amount (\$) \$25.00	Payee address; City; State; Zip Code PO Box 15284 Wilmington, DE 19850	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/02/2024	Payee name Bank of America	
Amount (\$) \$25.00	Payee address; City; State; Zip Code PO Box 15284 Wilmington, DE 19850	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/10 Rpt: 19/25		2 FILER NAME Beck, Elizabeth		3 Filer ID	
4 Date 10/09/2024		5 Payee name GoDaddy			
6 Amount (\$) \$44.26		7 Payee address; City; State; Zip Code 2299 W. Obispo Ave #201 Gilbert, AZ 85233			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Domain	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/02/2024		Payee name Google			
Amount (\$) \$30.70		Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/02/2024		Payee name Google			
Amount (\$) \$14.01		Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting	
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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/10 Rpt: 21/25		2 FILER NAME Beck, Elizabeth		3 Filer ID	
4 Date 11/04/2024		5 Payee name Google			
6 Amount (\$) \$14.06		7 Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/03/2024		Payee name Google			
Amount (\$) \$30.70		Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/02/2024		Payee name Google			
Amount (\$) \$30.70		Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/10 Rpt: 23/25	2 FILER NAME Beck, Elizabeth	3 Filer ID
4 Date 12/02/2024	5 Payee name Google	
6 Amount (\$) \$14.06	7 Payee address; City; State; Zip Code 501 Ellis St Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/07/2024	Payee name NGP VAN	
Amount (\$) \$1,215.24	Payee address; City; State; Zip Code 655 15th St NW Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2024	Payee name NGP VAN	
Amount (\$) \$1,215.24	Payee address; City; State; Zip Code 655 15th St NW Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 25/25
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 09/06/2024	5 Name of person from whom amount is received Roderick Miles Campaign	8 Amount (\$) \$250.00
6 Address of person from whom amount is received; City; State; Zip Code 7427 Whisterwheel Way Fort Worth, TX 76123		
7 Purpose for which amount is received Refunded Contribution		<input checked="" type="checkbox"/> Check if political contribution returned to filer