

**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
	NICKNAME	LAST Beck	SUFFIX
OFFICE USE ONLY			Date Received CSO REC'D JAN 15 '25 PM4:08
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 12328 Fort Worth, TX 76110		ZIP CODE
	Date Hand-delivered or Date Postmarked		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 Tock A. FtW 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 07/01/2024 THROUGH Month Day Year 12/31/2024		
10 ELECTION	ELECTION DATE Month Day Year 05/05/2025		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

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

**FORM C/OH
COVER SHEET PG 2**
2 of 25

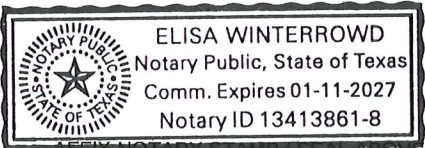
13 C / OH NAME Beck, Elizabeth	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS


16 CONTRIBUTION TOTALS	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)	\$ 4,913.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 6,964.90
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 13,758.73
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.

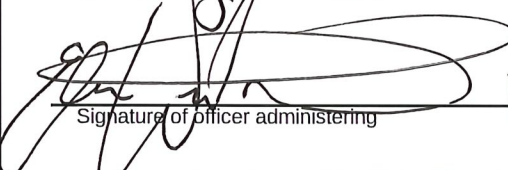


AFFIX NOTARY STAMP & SEAL ABOVE



Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Elizabeth Beck, this the 15th day of January, 20 25, to certify which, witness my hand and seal of office.



Signature of officer administering

Elisa Winterrowd

Printed name of officer administering

Sr. Admin Assist.

Title of officer administering oath

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: 1/11 Rpt: 4/25
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Victoria A	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 2330 Medford Court East Fort Worth, TX 76109		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Victoria A	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2330 Medford Court East Fort Worth, TX 76109		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Victoria A	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2330 Medford Court East Fort Worth, TX 76109		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Victoria A	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2330 Medford Court East Fort Worth, TX 76109		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Victoria A	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2330 Medford Court East Fort Worth, TX 76109		
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: 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: 3/11 Rpt: 6/25
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coble, Edgar	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 2212 Hawthorne Ave Fort Worth, TX 76110		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coble, Edgar	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2212 Hawthorne Ave Fort Worth, TX 76110		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Marc	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 4213 Toledo Ave Fort Worth, TX 76133		
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) The Alpine Consulting Group
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornish, B.C.	Amount of Contribution (\$) \$42.00
Contributor address; City; State; Zip Code 2525 Daisy Lane Fort Worth, TX 76111-1532		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crum, Elisabeth	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2524 Greene Avenue Fort Worth, TX 76109		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Crum Art

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: 5/11 Rpt: 8/25
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 07/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durocher, Angus	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 19 Depot St. Enfield, NH 03748		
8 Principal occupation / Job title (See Instructions) Software Developer		9 Employer (See Instructions) Self
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Formby, Tony	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 6725 Woodstock Rd Fort Worth, TX 76116		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Acre Distilling Co
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedden, Julia	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3300 Worth Hills Dr Fort Worth, TX 76109		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrix, Carol	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 1600 Texas St #2405 Fort Worth, TX 76102		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoedebeck, Charles	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 675 E. Royal Lane #1084 Irving, TX 75039		
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Lawyer

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: 7/11 Rpt: 10/25
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ledbetter, Denise	7 Amount of Contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code 5433 Byers Ave Fort Worth, TX 76107		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matteson, Mark	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code 147 Prospect St Ashland, MA 01721		
Principal occupation / Job title (See Instructions) telecom coordinator		Employer (See Instructions) Harvard University
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Natalie	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 6141 Walla Ave Fort Worth, TX 76133		
Principal occupation / Job title (See Instructions) Instructional designer		Employer (See Instructions) Self
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raines, Jeremy	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2313 Ashland Ave Fort Worth, TX 76107		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) RMP Industrial Supply Inc.
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riccetti, Richard	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2110 Hemphill Street Fort Worth, TX 76110		
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: 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: 9/11 Rpt: 12/25
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sublett, Candace <hr/> 6 Contributor address; City; State; Zip Code 685 John B Sias Memorial Pwky Fort Worth, TX 76134	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Exec Director		9 Employer (See Instructions) TCDP
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T. York, Terrell <hr/> Contributor address; City; State; Zip Code 3500 River Oaks Drive New Orleans, LA 70131	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeks Reyes, Cynthia <hr/> Contributor address; City; State; Zip Code 11000 Live Oak Creek Dr Fort Worth, TX 76108	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) MCFW
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Don <hr/> Contributor address; City; State; Zip Code PO Box470865 Fort Worth, TX 76147	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Landscape Architect		Employer (See Instructions) Self
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilcox, Jon <hr/> Contributor address; City; State; Zip Code 2600 W 7th St #2650 Fort Worth, TX 76107	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/11 Rpt: 14/25
2 FILER NAME Beck, Elizabeth		3 Filer ID
4 Date 08/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) johnson, barry	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code 3401 Lawndale Avenue Fort Worth, TX 76112	
8 Principal occupation / Job title (See Instructions) lawyer		9 Employer (See Instructions) self
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) phillips, greg	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 724 pennsylvania avenue fort worth, TX 76104	
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) phillips, greg	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 724 pennsylvania avenue fort worth, TX 76104	
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) phillips, greg	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 724 pennsylvania avenue fort worth, TX 76104	
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) phillips, greg	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 724 pennsylvania avenue fort worth, TX 76104	
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self

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.

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 <u>ONLY</u> 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 <u>ONLY</u> 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 <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	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.

1 Total pages Schedule F1: Sch: 2/10 Rpt: 16/25	2 FILER NAME Beck, Elizabeth	3 Filer ID
4 Date 11/01/2024	5 Payee name ActBlue	
6 Amount (\$) \$5.63	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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name ActBlue	
Amount (\$) \$1.88	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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2024	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: 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: 4/10 Rpt: 18/25	2 FILER NAME Beck, Elizabeth	3 Filer ID
4 Date 09/03/2024	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 10/02/2024	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
Date 08/06/2024	Payee name Blue Victory Communications	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code PO Box 300625 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Communication and Compliance Consulting
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	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.

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 <u>ONLY</u> 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 <u>ONLY</u> 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 <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: 6/10 Rpt: 20/25	2 FILER NAME Beck, Elizabeth	3 Filer ID
4 Date 07/02/2024	5 Payee name Google	
6 Amount (\$) \$13.94	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 (\$) \$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 <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 (\$) \$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 <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: 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: 8/10 Rpt: 22/25	2 FILER NAME Beck, Elizabeth	3 Filer ID
4 Date 11/04/2024	5 Payee name Google	
6 Amount (\$) \$30.70	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 07/02/2024	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
Date 12/02/2024	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	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.

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

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: 10/10 Rpt: 24/25	2 FILER NAME Beck, Elizabeth	3 Filer ID
4 Date 09/05/2024	5 Payee name Roderick Miles Campaign	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 7427 Whisterwheel Way Fort Worth, TX 76123	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2024	Payee name Roderick Miles Campaign	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 7427 Whisterwheel Way Fort Worth, TX 76123	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/16/2024	Payee name Tarrant County Democratic Party	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 685 John B. Sias Memorial Pkwy Suite 400 Fort Worth, TX 76134	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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

